

Meeting name	Sydney Children's Hospital Network (SCHN) Board
Date	Thursday 4 June, 2020
Time(s)	8:30 – 9:15am – SCHN NED Board Meeting 9:15 – 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 Donna Waters, Professor Louise Baur AM, Dr Abby Bloom, Mr Jack Ford, Ms Jane Freudenstein, Dr Elizabeth McEntyre, Mr Bruce MacDiarmid, Professor Kim Oates AM, Mr Jeremy Wright, Professor Les White AM Ex officio invitees Adjunct Associate Prof Cheryl McCullagh, Interim Chief Executive, Dr Kathryn Carmo (MSC CHW Chair), Dr Michael Solomon (MSC SCH 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). In attendance Dr Joanne Ging (A/Director Clinical Operations) Ms Emma Cuell, Associate Director Office of the Chief Executive Ms Amanda Walsh, Executive Officer Ms Julia Millen, Executive Assistant to Chief Executive (Board Secretariat)
Secretariat:	Ms Julia Millen, Executive Assistant to Chief Executive Phone: (02) 9845 3327

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			10 min	
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2.1	Acknowledgement of Country	Chair			Noting
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Ms Jane Freudenstein provided the acknowledged of country. Dr Elizabeth McEntyre read a message received from Damien Griffis, Chief Executive First People Disability Network and will share the document with all board members. The Chair will respond to the message from Mr Griffis on behalf of the SCHN Board.

2.2	Attendance and Apologies	Chair			
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Present (SCHN Board members): Ms Elizabeth Crouch AM (Chair), Mr David Nott (Deputy Chair), Professor Donna Waters, Professor Louise Baur AM, Dr Abby Bloom, Mr Jack Ford, Ms Jane Freudenstein, Dr Elizabeth McEntyre, Mr Bruce MacDiarmid, Professor Kim Oates AM, Mr Jeremy Wright, and Professor Les White AM.

Present (Ex officio invitees): Adjunct Associate Prof Cheryl McCullagh (Interim Chief Executive), Dr Kathryn Carmo (MSC CHW Chair), Dr Michael Solomon (MSC SCH Chair), Dr Mary McCaskill (Executive Medical Director, SCHN), Mr Colin Murray (Director of Finance and Corporate Services, SCHN); (Attendees): Dr Joanne Ging (A/Director Clinical Operations), Mr Tim Hoffmann (A/Director Planning and Redevelopment), Mr Ian Fuller (Director of Workforce), Mr Michael Dickinson (A/Director Clinical Integration).

Apologies: Dr Matthew O'Meara (NSW Chief Paediatrician).

2.3	Declaration of Conflicts of Interest	Chair			Declaration
	Nil				

2.4	Review of Minutes of meetings held:	Chair	3		Approval
	- 21 May 2020				

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

3.0	Matter for decision				
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3.1	Restricted Financial Assets – transition	Chief Executive / Director Finance & Corporate Services		10 min	Decision
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The Chief Executive (CE) noted the paper provided to members outlining options for restricted financial assets (RFA) funded positions and analysis of benefits and risks, commenting the Network has in excess of 100 full time equivalent of core operational staff that are costed to RFA funds. The executive summary provided recommends the implementation of a transition plan to move core operational positions to the general fund over a period of 10 years.

Members noted their support for this recommendation commenting core positions in the Network should not be funded through philanthropic activity. Members requested regular progress updates

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and this matter remain on the board's agenda. Members also recommended an independent review of the Network's activity, efficiency and funding arrangements.

Decision: The Board members approved the implementation of the transition plan to move core operational positions to general fund (Option B).

Action: The secretariat will note the RFA transition as a standing agenda item for annual updates to the Board.

4.0 Matters for discussion

4.1 Board Chair report

10 min

The Chair provided a verbal overview of activities undertaken in the last two weeks including meetings with the Ministry of Health, and attendance at the Luminesce Alliance Board meeting, commending the research presentation at that meeting. The Chair also commented on future meetings planned with WSLHD and the Sydney Children's Hospitals Foundation, and the Grace Gala virtual event scheduled on 13 June 2020.

4.2 Chief Executive report

15 min

The CE referred to the report provided commenting on executive team movements relating to the Director Allied Health (DAH), and further noted the Director Mental Health (DMH) role will also undergo recruitment activity within the next month. The CE recognised the work of the DAH and DMH, and the whole executive team commenting the majority of the executive are acting in their roles (some for longer than 12 months) and have assumed extra responsibilities during the COVID-19 emergency operations centre mode. SCHN Psychological Wellbeing week is underway and the executive team has made a commitment to review their meeting schedules and reschedule work commitments to fall within office hours.

The CE also noted the state-wide review of paediatric services is evaluating governance structures around various paediatric committees, and with the Cardiac Services Committee membership now finalised, their first meeting will be scheduled within the next few weeks.

The provided report was noted by members.

4.3 COVID-19 Update

10 min

The Director of Clinical Governance and Medical Administration (DCG&MA) noted the SCHN COVID-19 response continues at Level 1 COVID Business as Usual, as per the Pandemic Response Plan, which remains the baseline for the organisation while the pandemic is underway.

Elective surgery is approaching the level of service delivered before COVID-19 with additional elective lists being performed on Saturdays. Services are observing physical distancing in receiving patients and families on the day of surgery. Teams are reviewing the surgery waitlists and believe it will take some months to reduce lists. The COVID-19 hiatus has enabled the theatre schedule to be reviewed to provide more sessions and resource requirements for elective surgical patients across the week and between weeks.

Outpatient clinics have recommenced and the clinic schedules are increasing steadily, though reducing the number of children per clinic to accommodate physical distancing. The clinics have installed navigators to manage and monitor the volume of attendees appropriately, and teams are also working on visitor number restrictions with families to ensure physical distancing is maintained within the facilities in line with the updated Ministry of Health visitors policy. Telehealth appointments continue to be encouraged where appropriate.

DCG&MA noted the presentations at the SCH COVID-19 assessment clinic increased in the last week, and the Network has provided a nurse to the Bondi clinic to support testing of school age children. The provided report was noted by members.

4.4	Australia's First Virtual Paediatric Hospital – presentation	30 min	Discussion
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The CE and Director Clinical Integration presented an integrated care strategy for Australia's first Virtual Kids Hospital Network. The CE highlighted the strategy focuses on creating a model of care that provides choice to families, patients and shared care providers; it is designed to provide choice, access and the best scenario for timely care. The CE further commented on the Network's appetite to invest in change management processes now that align with redevelopment planning, and create the most efficient and accessible health service possible.

Members commented on challenges associated with Telehealth and involvement with vulnerable groups including access to appropriate interpreter services, and technology issues, and focus would be needed to overcome these issues in virtual care settings. Members also noted the information on mapping current virtual services and tools across patient cohort models and commented on the need to recognise what works well within these services and enhance where possible, and also involve consumers and patients in all consultation on future service models. Members were supportive of the strategy and requested a standing agenda item to keep apprised of further development and progress on this important initiative. A business case is under development.

Action: The secretariat will note this as a standing agenda item for regular updates to the Board.

5.0	Matters for Discussion – Executive Reports	50 min
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5.1	Quality and Safety
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The Committee Co-Chair noted the Quality and Safety report as read, and provided positive feedback in relation to the patient story. The Committee Chair also noted the Quarter 1 2020 patient and family feedback report provided as an attachment.

5.2	Workplace Health and Safety
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The Director Workforce noted the Workplace Health and Safety report as read. The Chair commented on work underway to review the current culture status for the Network, through the Nominations and People Committee.

5.3	Clinical Operations
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The Director of Clinical Operations (DCO) noted the April activity and performance results will see impacts due to COVID-19, commenting a large number of patients are not presenting to ED. Teams

are analysing data to see where there are improvements to manage smaller numbers. Elective surgery services are increasing however, access performance will show an increase in breaching patient numbers for the foreseeable future. The DCO will present the Whole of Hospital Program Operational dashboard to the Board next month.

5.4 Finance and Performance

The Committee Chair noted the Network net results in general fund remain unfavourable to budget, commenting our YTD activity result, though reduced during COVID-19, remains close to target and COVID activities justify some costs. FTE levels have been maintained to manage any surge in COVID-19 patients. The focus on reducing costs and guidance on planning will come from the executive team. Roadmap strategies to deliver FTE savings have been placed on hold whilst the impact of COVID-19 is assessed. The Finance and activity teams are tracking expenditure and financial impacts attributable to COVID-19. The provided report was noted by members.

Action: The secretariat will include the MOH selected performance indicators by LHD and Network report for future monthly meetings.

5.5 Planning and Redevelopment

The Director of Planning and Redevelopment (DoP) provided an update on the redevelopment programs for CHW Stage 1 and 2, and SCH Stage 1. CHW stage 1 is progressing the building and operational commissioning work for the Central Acute Services Building. Randwick Health and Education Precinct governance has been revised with the aim to strengthen and streamline arrangements. The Sydney Children's Hospitals Foundation and Children's Cancer Institute have developed a memorandum of understanding with Minderoo Foundation for financial support. SCH Stage 1 and CHW Stage 2 projects will move into concept planning phases through May – June. The DoP noted the concept planning and value management exercises on both redevelopments bring into focus the need for priority setting in each redevelopment.

5.6 Clinical Integration

The provided report was noted by members.

5.7 Research

The Chair Research Advisory Committee (RAC) commented on the investigator grant success for SCHN noting the grants to up and coming researchers, and the spread of specialties is a great result. Members commented funding for some health and medical research has been affected by COVID-19 and the risk for the health and medical research workforce of the future. A focus on support for early to mid-career researcher staff is needed from the Network and Foundation. The Chair recommended this item for future discussion with the board members, including how the Network is building capacity for Aboriginal and Torres Strait Islanders to become researchers. The Chair RAC commented this item will be noted for the RAC to discuss.

6.0 Matters for Noting

6.1 Board Committee Minutes

Noting

The following provided reports were noted as read:

6.1.1 Finance and Performance

6.1.2 Quality and Safety

6.2 Mandatory Training Report

The provided report was noted by members. Members commented the overall compliance for core modules including medical staff had decreased (from 82% to 77%), and requested follow up on this item. A further report will be prepared for the next board meeting.

6.3 SCHN Psychological Wellbeing Week

The provided report was noted by members.

7.0 Any Other Business

No items were advised.

8.0 Next meeting

The next meeting will be scheduled 8:30 – 11:30am on Thursday 2 July, 2020. There being no further business, the meeting closed at 11:35am.