

## Minutes for NSW Health Pathology Board Meeting

29/10/2019 | 10:30 AM - 01:06 PM, The Crawford House, 60 Uralba Street, Lismore

### Attendees

<u>Board members present</u>: Peter Loxton; Maree Gleeson; Michael Legg; Murray Austin; Tracey McCosker; Nicholas Hawkins; Kay Hyman; Darren Turner; Tracey McCosker (ex officio) <u>In attendance</u>: Tammy Boone; Nerrida Barton and Deborah Lawson (by telephone, in respect of Item 5) and Martin Sainsbury (by telephone, in respect of Item 10). <u>Secretariat</u>: Tanya Dunn

### Agenda

# 1. Welcome, Attendance and Acknowledgement of Country, Notification of Fire Exits, Assembly Point and Amenities

- The Chair opened the meeting with acknowledgment of country and welcomed those present and the Secretariat recorded the minutes.
- Apologies were noted.
- A quorum of Board Members was present, and the meeting proceeded with business.
- The Board acknowledged and expressed appreciation to Kay Hyman and Murray Austin for their commitment and professionalism to the NSW Health Pathology Board; noting that their terms conclude on 30 November 2019.

### 2. Declarations of Conflict of Interest

- The Chair requested all attendees to declare or remove any conflicts of interest at the meeting.
- The Board Members **APPROVED** the Conflict of Interest Register subject to amendments outlined at the meeting.
- Professor Nicholas Hawkins noted potential conflict of interest and will provide additional information to Tammy Boone, Director, Corporate Governance to be included on the register.

## 3. Confirmation of previous minutes and action log

The Board Members **APPROVED** the draft Board meeting minutes of the 26 August 2019 as a true record of the meeting.

**MOVED:** Maree Gleeson **SECONDED:** Murray Austin

The action log was reviewed as part of the agenda. Minor amendments noted.

## 4. Chief Executive Update

The Chief Executive's Report was taken as read.

Noting:

- Positive budget meeting held with the Secretary and Deputy Secretaries.
- Upcoming Gateway 2 Review. Further discussion to be held regarding proposed business model and funding. Noting the excellent work provided by Juliana Iles-Mann, Director of ICT, Client and Business Services.
- Michael Legg referred to the recent Australian Institute Company Directors update and 2019 handbook and will provide the Chief Executive with further information.

### 5. Clinical Services Plan

Nerrida Barton and Deborah Lawson provided a presentation on the NSW Health Pathology Clinical Services Plan.

Noting:

- The NSW Health Pathology Planning and Accountability Framework.
- The translation of NSW Health Pathology Plans at a local level across NSW Health Pathology.
- A discussion paper outlining the key workforce implications of the Clinical Service Plan has been developed with a small working group to further this work by developing high level principles around how workforce change would be handled by NSW Health Pathology and built on the themes of Caring, Connecting and Pioneering.
- Continue to work with the Ministry of Health, Health Infrastructure and internally to identify major laboratories that have not been included in the clinical services planning stage or capital investment cycle; and to ensure laboratories are included in early planning infrastructure builds; or access to funding for laboratories requiring refurbishment that is not dependent on Local Health District or Health Infrastructure cycles.
- Consideration to explore and influence the development and design of future models of care and the delivery of pathology services into the future.

The Board **APPROVED** the Clinical Services Plan subject to amendments noted at the meeting to better capture Biobanking, Genomics and Microbiology services.

Clinical Services Planning Committee will continue to review documentation and provide an update to the Board in October 2020, including in relation to collection centre planning.

The Board requested that the Clinical Service Plan launch, and proposed communication plan ensure linkage with Local Health Districts.

The Board acknowledged the assistance of the Communications Team in the development of the Clinical Services Plan.

## **Standing Items**

## 6. Finance and Performance Committee

The Finance and Performance Committee Report was taken as read. Noting:

- Activity continues to increase. Intrahealth revenue has increased \$5.7M on budget for YTD.
- \$5.8M budget moved to allow for rebates and potential credits back to Local Health Districts (LHDs).
- Draft pricing principles paper was discussed at the Finance and Performance Committee meeting and will be used to guide the process of changing the pricing model. Plan for a cost-based pricing for 2022/23.
- Work is progressing regarding revenue leakage and revenue implications of Medicare compliance billing on the LHDs. Individual meetings have been held with LHD Finance and Billing teams to work through the impacts.
- FTE numbers are tracking up on the prior year balances with activity and some of the large statewide projects driving this increase. Further investigation to occur and an update to be provided at the next Finance and Performance Committee meeting.
- An area of focus on consumables costs and the implementation of an enhanced inventory and stock management system.
- Continue to work with and assist LHDs around pathology ordering/demand management initiatives and exposure to work underway regarding the Pathology Atlas of Variation.

### **Rights of Private Practice Contractual Arrangements**

The Staff Specialist Rights of Private Practice (ROPP) Arrangements Report was taken as read.

#### ACTION: ROPP update to be provided at the December Board meeting.

### **Efficiency Savings Strategies**

The Budget and Efficiency Savings Target Strategies Report was taken as read. Noting:

 NSW Health Pathology has been tasked with a savings target of \$15.7M in 2019/20 including \$13.4M of efficiency savings and \$2.3M of procurement savings.

- A proposed allocation of savings by efficiency strategy and business development plan has been developed, with further discussion and ideas to be developed in conjunction with all areas of the business to ensure NSW Health Pathology meet their targets. A small team has been established to identify, program and track the savings. 58 initiatives assigned to SLT responsibility.
- Nepean Blue Mountains Local Health District have volunteered to participate in a variable shared cost analysis in relation to Rapid Flu testing.
- Regular updates on efficiency savings to be provided to the Board at all future meetings and on an adhoc basis as required.

## **Board Scorecard**

The Board Scorecard was taken as read. Noting:

- No reported SAC 1 or 2 since May 2019.
- Vertical audits on track.
- Anomaly in WBiT reporting data. Update to be provided at the next Board meeting.
- Coronial cases continue to show improvement. Noting appointment of an additional Forensic Pathologist. Improving timeliness of coronial procedures taskforce has been established.
- Change to Coroners Act 2009 enabling forensic pathologists to conduct preliminary medical examination upon admission without the need for coronial direction.
- Ministry of Health are working with professional bodies (RACGP and AMA) to better understand GP needs and possible education strategies to promote confidence in coronial matters.
- KPIs across strategies will continue to develop over time.

## 7. Quality and Safety Committee

The Quality and Safety Committee Report was taken as read.

Noting:

New supervision requirements came into effect 1 August 2019. All laboratories with the exception of two (John Hunter Hospital and Concord re: genetic testing) are currently compliant with the revised Standard. NATA has granted both laboratories (6) six months to manage a long-term strategy regarding genetic testing at both sites. Both laboratories remain accredited and eligible to make claims against Medicare benefit.

## 8. Audit and Risk Management Committee

The Audit and Risk Management Committee Report was taken as read. Noting:

- Noel Patterson, Manager, Internal Audit for HealthShare and eHealth provided a presentation on the Internal Audit Function and Program for both organisations. Further work to be undertaken broadly across the health system on assurance reporting and activities.
- Ongoing management and priority regarding Cybersecurity and maturity assessment against the Australian Cyber Security Centre (ACSC) "Essential 8 strategies to mitigate cybersecurity incidents. Consideration of involving all health entities key stakeholders in a group discussion.
- Clinical Risk cybersecurity is an ongoing concern to the ARMC. Exploring an opportunity to work
  with Clinical Excellence Commission relevant experts regarding the development of a NSWHP
  wide assurance map, identifying and rating the effectiveness of controls in each line of defence
  across various risk categories: and further review across each risk category.
- The Fraud and Corruption Control Framework presented to the ARMC; well received and the committee endorsed the policy and procedure that has been developed, as well as the proposed staff awareness campaign and training program.
- Personal liability of Board Members was raised. Tammy Boone confirmed Section 126C of the Health Services Act (under which the NSW Health Pathology Board is established) provides that a member of an appointed body is not personally liable for any act or omission done or omitted to be done in good faith pursuant to their appointment. Further information to be circulated to Board Members for information.

## 9. Statewide Laboratory Information System Update

The Statewide Laboratory Information System Report was taken as read. Noting:

- Gateway 2 interviews scheduled for November.
- Participation in the Single Digital Patient Record Request for Information process.

## 10. People and Culture

## Work Health Safety

The Work Health and Safety Report was taken as read. Noting:

- 9 claims Quarter 1 compared to previous year's 13 claims Quarter 1; 31% reduction on previous year.
- Nil reportable incidents.
- Nil Safework reports.

## **Bullying and Culture Reporting Template**

The Board NOTED the Bullying and Culture Template

Noting:

- Number of new bullying complaints reported due to increased focus on reporting requirements.19% identified subjected to bullying over the last 12 months at an unacceptable level. Results are down on previous year which was 21%.
- Report provided to Ministry of Health of bullying complaints reported to HR department via employee or manager. YTD 9 reported bullying complaints; 5 for Quarter 1.
- The Board requested additional detailed information on bullying complaints proven vs. unproven to consider cause, factors and nature of the complaints.
- Average days to resolution noted as 41 calendar days.
- Review of bullying reporting template; consider different data formatting regarding graphical presentation.
- Psychological injury resolution noted at 150 days. 5 reported cases YTD; 2 for Quarter 1.
- Revising Cognitive Institute programs re: proposed pilot program of six (6) programs to six (6) clinical senior leaders with a view to rollout more broadly in the future.

## ACTION: Bullying complaints report submitted to the Ministry of Health to be circulated to the Board.

## **People Matters Survey Results**

The Board **NOTED** the People Matters Survey Results presentation.

Noting:

- Survey results highlights, and lowlights presented to the Board.
- 3 key factors identified in the service compact are: response rate, culture engagement levels and action on results. Culture engagement levels remain steady. Increase in response rate with a significant increase in action on results.
- 9% staff identified as subjected to racism.
- Re-promote RITE values across the organisation; in conjunction with New Ways to Work.
- Half day trainee supervisor workshop held for public and private junior medical officers. The workshop was an opportunity to discuss common issues arising in our laboratories around training, bullying and performance management and NSWHP's obligations as employers for ensuring a safe working environment for our trainees. Propose workshop to be held annually.

## ACTION: Board to review progress against action plan for addressing 2019 Survey findings before 2020 Survey is released.

## **Reconciliation Action Plan Update**

The Reconciliation Action Plan update was taken as read.

Noting:

- Internal draft developed. Consultation draft to be presented to the Strategic Leadership Team for December.
- Formal document to be circulated in early 2020 for consultation to internal and external stakeholders; actions and initiatives to promote reconciliation activities. Enable a RAP plan to be finalised July 2020. Highlight areas to improve service provision to Aboriginal and Torres Strait Islander communities and community groups, Local Health Districts and other key partners.

## Employment and Industrial Legal Matters Update

The Industrial Relations Report was taken as read.

## 11. Future structure and timing of Board Meetings

The Board **ENDORSED** the proposed 2020 Board meeting dates.

Noting:

- A dedicated time of 45-60 minutes to be allocated within each Board agenda to enable discussion of strategic initiatives presented to the Board.
- Meeting duration to be extended by 30 mins commencing 10am-1.30pm, to be reviewed after 6 months.
- The Board agreed to keep standing agenda items to 5 (five) minutes for exception reporting only.
- Overlap between the Board, Finance and Performance Committee and the Audit and Risk Management Committee was raised. Further discussion will occur as part of the Phase 2 Governance Review.
- October 2020 regional meeting to be hosted at Wollongong Hospital, Illawarra Shoalhaven Local Health District.
- Consideration to host Board meetings at alternate sites to align with the move from Chatswood to St Leonards.

### **Other Business**

### 12. Items without notice

There were no noted items without notice.

### **Meeting Feedback**

## **Board Evaluations**

### Items for Information only

• Performance KPIs Critical Issues and Performance Reports

- Finance and Performance Committee Minutes
- Audit and Risk Management Committee
- Quality and Safety Meeting Minutes
- Clinical Council
- NSW Health Pathology Operational Plan Q1
- WHS CE Quarterly Report
- Acknowledgment Letters

### **Next Meeting**

The next meeting is to be held Wednesday 11 December, 10-1.30pm, Chatswood.

### **Meeting Close**

There being no further business to come before the meeting, the meeting closed at 1.06pm.

#### Endorsed 11 December 2019

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Peter Loxton, Board Chair

MEETING DATE	ACTION ITEM	RESPONSIBILITY	STATUS UPDATE
26/08/2019	Strategic Risk Register to be provided to Board Members for every second Board meeting. Presentation on Risk Appetite Statement, Risk Register and Enterprise Risk Management Framework at future meeting.	Tammy Boone	Completed on December agenda
26/08/2019	Update on the status of the implementation of a statewide quality management system to be provided to the Board at a future meeting.	Roger Wilson	Ongoing (Feb 2020)
26/08/2019	Research and Innovation KPIs to be identified and included in monthly scorecard. High level commentary on outlier results to be included in the performance reports.	Darren Turner	Ongoing
26/08/2019	Progress towards the implementation of Research Governance Framework and broader update on Research and Innovation Framework activities to be presented to the Board in 2020.	Roger Wilson	Ongoing (Aug 2020)
26/06/2019	Chief Medical Information Officer and Chief Information Officer to provide an update on status and future strategies at a future Board meeting.	Stephen Braye	Ongoing (Apr 2020)
27/02/2019	Daniel Hunter, Chief Financial Officer, Ministry of Health to be invited to attend an upcoming Finance and Performance Committee meeting and Board meeting.	Darren Turner	Ongoing (Feb 2020)
27/02/2019	The Board welcomed an update and visibility on internal programs and projects; including post review analysis at a future meeting.	Darren Turner	Ongoing (Apr 2020)
11/12/2018	Perinatal Post Mortem Service update to be provided at a future meeting.	Robert Lindeman	Ongoing (Dec 2019)