

## Minutes for NSW Health Pathology Board

24/08/2022 | 10:00 AM - 01:30 PM , 1 Reserve Road, St Leonards, Bar Beach Boardroom, Newcastle and Microsoft Teams

### Attendees

Peter Loxton; Maree Gleeson; Nicholas Hawkins; Darren Turner; Lyn Baker; Jason Ardler; Carmen Rechbauer; Nigel Lyons and Cathryn Cox

**Apologies:** Michael Legg, Nigel Lyons and Elizabeth Salisbury

**In Attendance:** Tracey McCosker, Tammy Boone, Martin Canova, Michael Whiley and Deanna Paulin

**Secretariat:** Tanya Dunn

### Welcome, Acknowledgment of Country and Emergency Management

The Chair declared the meeting opened with acknowledgement of country and welcomed those present. The Chair **NOTED** apologies received.

A quorum of Board members were present, and the meeting proceeded with business. The Secretariat recorded the minutes.

### Declarations of Conflict of Interest

The Chair requested all attendees to declare or remove any conflicts of interest at the meeting.

The Board Chair enquired of any changes to the extract from the Conflict of Interest Register. No new conflicts of interest were declared.

### Confirmation of previous Minutes and Review of Action Log

Board members were invited to comment on the minutes.

The Board members **APPROVED** the draft Board meeting minutes of 22 June 2022 as an accurate record of the meeting.

**MOVED:** Jason Ardler

**SECONDED:** Maree Gleeson

The Action Log was reviewed and noted.

The Chief Executive referred to the Amalgamated Steering Committee (ASC) performance presentation and year in review report at the Finance and Performance Committee.

The Board requested a high-level executive summary to be presented at the October Board meeting. At a future Board meeting, the Board also requested a summary of the Patient Experience Survey presentation provided by Liz Geddes to the Quality and Clinical Safety Committee and the Virtual Care presentations delivered by the Sydney Children's Hospital Network (SCHN) and the Agency of Clinical Innovation (ACI) to the Clinical Council Committee.

## **Chief Executive Update**

The Chief Executive's report was taken as read.

- Noting engagement with the Health Services Union (HSU) on Award variations for scientific and technical staff. The Board will be kept informed on progress.
- Dinners with pathologists to facilitate discussion around the Fusion program, Service Configuration work and Rights of Private Practice.
- An update on current recruitment for the positions of Associate Director, Research and Risk Manager, Corporate Governance.
- The great work on the Forensic Medicine Information System implementation.
- Recognition of Nigel Lyons, who has stepped down from his Deputy Secretary role, and his valuable contribution to the public health system, particularly through leadership positions he has held during that time.
- The Board Chair reiterated the Minister's priority regarding bullying and culture, which is of interest to the Board. An update to be provided by Deanna Paulin at a future Board meeting.

## **Statement of Service**

Alex Eigenstetter, Director, Planning, provided the Board with an overview of the Statement of Service (SoS).

- The Board noted the SoS 22/23 Budget, KPI's and deliverables that the Strategic Leadership Team (SLT) had endorsed for submission. Noting additional funding received for targeted strategic recruitment that would be paid according to indicators for outcome and performance measures. NSWHP and the MoH meet quarterly to report on the SoS performance.
- The SoS 22/23 deliverables will constitute the NSWHP Operational Plan.
- The SoS is aligned closely with the Future Health Strategic Framework and the NSW Health Performance Framework.

**Action: The Board would like to be kept informed on progress towards the targeted strategic recruitment from additional funding allocation and performance measures.**

## Annual Corporate Governance Attestation

Tammy Boone provided the Board with an overview of the Legislative Compliance Framework and annual Attestation Statements.

Noting:

- The Corporate Governance Attestation Statement has been endorsed by the Audit and Risk Management Committee and submitted to the Ministry of Health (MoH) and published on the NSWHP Internet site; noting no exceptions.
- The Internal Audit and Risk Management Attestation Statement has been submitted to the MoH; noting no exceptions.
- The Board noted the Legislative Compliance Register for the reporting period 2021-22, as well as the identified key compliance issues and risks for NSWHP.
- The Board noted the proposed Board Committee Review to assess if the distribution of responsibilities remains clear and effective and to enable ongoing collaboration among Committee Chairs.
- The Board agreed that the review will be undertaken in September/October 2022, including a short virtual workshop involving the Committee Chairs and other interested Board members, with the findings to be presented at the October meeting.
- Reference was made regarding the issues surrounding the Human Tissue Act. Noting that the Research and Corporate Governance teams, along with the Director, Clinical Operations are working to address the outstanding issues.

**Action: The Board Secretariat and Director of Corporate Governance will work with Committee Chairs to identify suitable dates for the Board Committee review workshop.**

## PathWorks Update

Timothy Eckersley, Enterprise Architect, ICT briefed the Board on the PathWorks mobile application (app), which provides clinicians with secure access to patient results and the delivery of vital pathology information to improve patient outcomes.

Noting:

- Pilot began in late August 2022 with clinicians from the Royal North Shore Hospital and North Shore Private Hospital.
- There was discussion regarding the privacy of the application and usage. In conjunction with the MoH Privacy Unit, a privacy impact assessment was completed. NATA accreditors will conduct an evaluation in accordance with regulatory accreditation requirements. The feature of built-in self-governance feeds into an audit log that records all users.

- The Board were informed on the existing application registration and governance procedures. The development of a rollout strategy , which includes a component of the statewide test catalogue, is now underway, and the Board will be informed once the strategy has been finalised.

## **NSWHP Website**

Renee Mantle, Project Lead, Strategic Communications presented an update on the website project, including an overview of completed project phases, critical integrations, collaborations and next steps, as well as provided a brief demonstration of the design and key features of the new website.

The Board **NOTED** the executive summary, discovery and user experience design reports that were provided, as well as the critical integrations and collaborations and next steps.

The Board were informed that the project has a design approach that focuses on human-centred design and consultation, and that this approach is intrinsically linked to the draft NSWHP Consumer Partnership Framework .The Board will be updated on the progress of the new NSWHP website, and kept informed about the launch, which will be soon.

## **Post SLT Strategic Planning Session**

The Board was briefed on the two-day Strategic Leadership Team (SLT) Planning session held on the 18 and 19 July 2022. During this session, the following topics were discussed: review of the NSWHP Strategic Plan, standardisation and harmonisation, clinical operations and clinical streams and future structures, and Rights of Private Practice. The SLT considered the two-day session valuable, as it provided an opportunity and sufficient time to engage in discussion on challenging topics.

Clinical Stream's Plans on a Page, Rural and Regional Services, Collections Strategy, Clinical Trials and Climate Change Adaption Plan will be considered and discussed during the next two-day workshop, which will be held in early September 2022.

The Board was provided with the opportunity to provide feedback or ask questions regarding the two-day SLT workshop's discussions and actions.

The Board acknowledged the discussion topics and themes that will be considered during the upcoming two-day workshop.

## **Finance and Performance Committee**

The Finance and Performance Committee Report was taken as read.

Darren Turner, Chair of the Finance and Performance Committee, provided an overview of the financial performance of NSWHP.

Noting:

- The full year NCOS is favourable to budget including abnormal expense and cash transfer to the asset reserve.
- Underlying BAU result on budget for the month and unfavourable for the YTD.

- YTD COVID result favourable to budget (ex BAU impact).
- Intrahealth revenue is down on budget for the YTD although price increase for LHD rents contributing.
- Infrastructure fee revenue is down on budget for the YTD, against last year YTD.
- Employee related costs were favourable budget for the month with high levels of sick leave and overtime as well as efficiency targets.
- Goods and Services unfavourability in the month and YTD primarily due to unmet efficiency targets. Noting concerns regarding the CPI of goods and services and other expenditure as a result of price increases and pressures. Work is being done to define metrics for goods and services, which will be mapped against activity.
- Increased sick leave due to staff on sick leave. Unfavourable movement from January to June.

The Board were provided information on the 22/23 financial budget for NSW Health Pathology. Noting that all operational units have developed their budgets and have reported balanced budgets against their allocated subsidy levels. The financial impacts of COVID on operations has been excluded from the budget. The MoH is providing revenue and expense budget for COVID on an ongoing basis as incurred and reported by health entities up until the 31 December 2022 when the National Partnership Agreement with the Commonwealth ends.

The Board **NOTED** the key 22/23 budget points, pathology pricing changes and additional employee related funding. The Board were informed of the budget risks. Noting the MoH Budget adjustment targets and procurement targets.

The Board **NOTED** the 2022/23 Capital Projects and capital budget. Noting Fusion is not included. The highlights of the July 2022 Scorecard were noted by the Board. Statement of Service (SoS) initiatives are being allocated to strategic priorities, and KPI measures are being defined. Noting progress on a couple of the highlighted issues; in particular around the MoH target for approving research proposals not met. The Board was provided an update on the vacant position, and the responsibilities of the Associate Director, Research, and the existing research approval process. Noting that work to improve the process is ongoing.

## **Audit and Risk Management Committee**

Lyn Baker, Chair of the Audit and Risk Management Committee, provided an update on the ARMC's activities.

Noting:

- Progress accomplished against the 2021/22 Internal Audit Plan. All audits have been completed with the exception of the ISO 027001 Compliance readiness audit and the Privacy Compliance audit, all audit. Between March – July 2022, 33 recommendations were closed; while 37 recommendations were delayed.

- The ARMC reviewed and discussed the Risk Report regarding current significant risks during its July meeting. Indicating a rise in the risk rating associated with budget performance, supply chain issues, employee wellbeing and excessive annual leave. It was also acknowledged at the July meeting the exceptional work around the Legislative Compliance Register, Attestation and Compliance Management, as well as the annual Fraud Control Survey and Health Check.
- The MoH has released an updated Enterprise Risk Management Policy. The Board will receive information on implementation by the end of 2022 or early 2023.
- Emerging risks have been identified and discussed previously and are consistent with those of other agencies.
- The ARMC will convene on the 31 August 2022 to review and endorse the final financial statements.
- 2021/22 Committee members have completed a questionnaire regarding the Committee's performance, and the ARMC Chair has provided the Board Chair with a self-assessment of her role as Chair.
- Committee Independent member changes.

## **Medical Staff Council**

There was no report provided for the Medical Staff Council as the meeting scheduled for the 17 August 2022 did not meet quorum, and Elizabeth Salisbury was a noted apology for today's Board meeting.

## **Medical and Dental Appointments Advisory Committee**

The Medical and Dental Appointments Advisory Committee (MDAAC) report was taken as read. Maree Gleeson, Acting Chair of the MDAAC, provided an overview of an application presented to the April MDAAC regarding joint MDAAC consideration for a clinical LHD role and an extension of scope of practice to work in pathology, and the outcome of this application, in addition to demonstrating the value and importance of an independent MDAAC for NSWHP.

Michael Whiley acknowledged the support received from Nigel Lyons, Chair, MDAAC and Maree Gleeson, Acting Chair, MDAAC.

## **Quality and Clinical Safety Committee**

Nicholas Hawkins, Chair of the Quality and Clinical Safety Committee provided a verbal update on the 29 June Committee meeting to the Board as the agenda topic was absent from the Board meeting agenda.

Noting:

- Cain Byrne appointed to the role of Director, Clinical Governance and Colin Shephard, Associate Director, Clinical Governance. Pending the finalisation of the appointment of the Patient Support Officer.

- Clinical risk focus on blood transfusions.
- Akuna is progressing well and the development of the QMIS is developing.
- Patient Experience Survey with a summary of the presentation to be provided to the Board at a future meeting.

## **Culture, Safety and Wellbeing and HR**

The Safety and Wellbeing Report was taken as read.

Noting:

- Changes around vaccination categories and COVID booster vaccination requirements, the impact of staff furloughs on the workforce and the rise in EAP usage.

Deanna Paulin provided an update on her return from parental leave in a part time capacity through the end of 2022, as well as the strategic priorities and objectives for People and Culture that Dee will oversee in the coming months, including a functional HR review, the NSWHP Education and Training roadmap, and the modernisation of Industrial Awards and policies. Jess Lee will remain as Acting Director, People and Culture until Dee returns to her full time role.

**Action: A future meeting to include an update on organisational culture and responses to the People Matters Employee Survey (PMES).**

## **Fusion**

The Fusion Project Report was taken as read.

The Chief Executive provided a brief overview on the progress and activities of the Fusion Project.

Noting:

The Single Digital Patient Record (SDPR) vendor process has progressed.

The Board **NOTED** the activities and performance of the Fusion Project.

## **Items without notice**

There being no other business to come before the meeting, the meeting closed 1.27pm.

## **Board Evaluation**

## **For Information**

## **NSWHP Scorecard**

The Scorecard was provided for information and taken as read.

## **Medical and Dental Appointments Advisory Committee Meeting Minutes**

Noted for information.

## **Finance and Performance Committee Meeting Minutes**

Noted for information.

## **Audit and Risk Management Committee Meeting Minutes**

Noted for Information.

## **Transformation Program Status Report**

The Transformation Program Status Report was noted for information.

## **Transformation Program EOFY 21/22 Summary**

The Transformation Program EOFY 21/22 Summary was noted for information.

Endorsed by Peter Loxton, Board Chair, NSW Health Pathology

A handwritten signature in black ink, appearing to read "Peter Loxton".



24/08/2022 Item 10.	The Board would like to be kept informed on progress towards the targeted strategic recruitment from additional funding allocation and performance measures.	Darren Turner	ONGOING
24/08/2022 Item 6.	The Board Secretariat and Director of Corporate Governance will work with Committee Chairs to identify suitable dates for the Board Governance review workshop.	Tanya Dunn Tammy Boone	ONGOING Nov 2022
24/08/2022 Item 14.	A future meeting to include an update on organisational culture and responses to the People Matters Employee Survey (PMES).	Deanna Paulin	ONGOING Dec 2022
22/06/2022 Item 7.	An update on the NSW Health Pathology Climate Change Adaptation Strategy will be provided to the Board at the December meeting.	Michael Symonds	ONGOING Dec 2022
27/10/2021 Item 6.	Presentation to the Board at a future meeting on the progress of projects within the Amalgamated Steering Committees.	Martin Canova	ONGOING
24/02/2021 Item 12.	A copy of the White Paper to be presented to the Board at a future meeting.	Tracey Dwyer	ONGOING Dec 2022
11/12/2019 Item 8.	NSW Health Statewide Biobank updates to be provided at a future Board meeting. Consideration is to be given to hosting one of the 2022 Board meetings at the Biobank facility.	Tracey McCosker	ONGOING
<b>Items closed since the last meeting</b>			
22/06/2022 Item 4.	An opportunity to assess the current pathology service arrangements in Port Macquarie and to identify and demonstrate the benefits of the change over the coming months.	Tracey McCosker	COMPLETED
22/06/2022 Item 7.	The Strategic Leadership Team to make use of the two-day strategic session to discuss how NSW Health Pathology can better integrate with and contribute more	Tracey McCosker	COMPLETED

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27/04/2022 Item 11.	Out of session, the Board Chair and the ARMC Chair will meet to provide feedback on the risk areas raised at the ARC sector-wide leadership forum for all NSW	Peter Loxton Lyn Baker	COMPLETED
27/04/2022 Item 5.	The Chief Executive to brief the Coordinator-General, Regional Health, NSW Ministry of Health around the provision of pathology services at Port Macquarie	Tracey McCosker	COMPLETED
27/04/2022 Item 7.	Michael Symonds will express the Boards appreciation to the staff and management of NSWHP for their efforts in responding to the floods.	Michael Symonds	COMPLETED