

Sydney Local Health District

Meeting One Hundred and Sixty- Three of the Board

Date: Monday 20 October 2025
Time: 08:45 – 11.15am/11.30 -12.30pm
Venue: Concord Hospital Building 60 Rooms 1.2 and 1.3 / Teams- per calendar invite
Chair: Adjunct Professor Karen Crawshaw PSM, Chair

1. Acknowledgement of Country

The Chair conducted Acknowledgment of Country.

2. Welcome / Present / Apologies

Present

Adjunct Professor Karen Crawshaw PSM, Chair
Ms Deb Willcox AM, Chief Executive
Ms Ronwyn North, Member
Mr Richard Acheson, Member
Mr Rob Furolo, Member
Dr Alicja Smiech, Chair, Medical Staff Executive Council
Ms LaVerne Belleair, Member
The Hon. Carmel Tebbutt, Member
Dr John Sammut, Member
Mr Raymond Dib, Member

Apologies

Dr Mary Haines, Member – On Official duties at Council of Board Chairs meeting

In attendance

Dr Andrew Hallahan, Executive Director Medical Services Clinical Governance and Risk, SLHD
Dr Genevieve Wallace, Executive Director of Operations, SLHD
Mr Puneet Datta, Executive Director of Finance, SLHD
Ms Ivanka Komusanac, Executive Director Nursing and Midwifery, SLHD
Ms Zoe Hassoun, Secretariat
Mr Dion Puru, Acting Chief Information Officer (Guest)
Ms Gerry Brus, Chair SLHD Audit and Risk Committee (Guest)
Ms Kristine Louis, VAD Nurse Manager (Guest)
Ms Kelly Lewis, Clinical Nurse Consultant (Guest)

3. Declaration / Removal of conflicts of interest

The Chair advised to declare / remove any conflicts of interest at this meeting.

There were no additional new conflicts of interest to declare or to be added/removed in the Register for this meeting.

4 Presentations

4.1 Artificial Intelligence (AI)

The Board received, read and noted the presentation.

The Acting Chief Information Officer provided an update on AI initiative

- Outlined issues associated with governing Cybersecurity and the role of eHealth and Ministry Health
- A research project involving AI and Computed Tomography (CT) of the Brain in the Emergency Department of RPA is being undertaken by the Green Light Institute
- ACTION: Executive Director Research to provide an update to Research Committee.
- The Board resolved that the Patient Safety and Quality Council will assume governance oversight for all Artificial Intelligence (AI) initiatives across the organisation.
- The Board requested a demonstration of Heidi AI Scribe in a future Board meeting.

5 Confirmation of previous minutes

Minutes of the previous meeting held on the 15 September 2025 have been accepted as true and accurate record of the meeting.

6 Actions arising from Previous Meeting

6.1 Action List

The Board received, read and noted the items on the action sheet.

7 Patient Story

Kristine Louis, VAD Nurse Manager and Kelly Lewis, Clinical Nurse Consultant Intensive Care Unit, shared the following:

- A patient with an incurable brain tumor was referred to the SLHD Voluntary Assisted Dying (VAD) Service. After approval for VAD, the patient and his wife requested to be able to donate his organs after death. Tests and scans were conducted to confirm eligibility and organ donation successfully occurred following VAD. This was the first time organ donation following VAD had been requested in NSW. Multiple services worked collaboratively to fulfil the patient, and family wishes while ensuring that both VAD and Organ Donation standards were strictly upheld. NSW Health is now actively developing a formal organ donation policy specific to VAD cases.

8. Matters for Approval / Resolution

8.1 CRGH Restorative Action Plan

- The Board met and discussed the Restorative Action outcomes and expressed their satisfaction with progress made around the outcomes, noting the importance of ongoing attention by CRGH and SLHD executives.

8.2 Update from Chair SLHD Audit and Risk Committee

The Board received, read and noted the documents.

The Chair of the Audit & Risk Management Committee (ARMC), Ms Gerry Brus, addressed the Board, outlining the Audit & Risk Committee's operations, the new Internal Control Framework from the Ministry of Health, and the financial statements process and results for the year ended 30 June 2025.

- The Chair (ARMC) reported that the financial statements for the year ending 30 June 2025 were submitted within the required timeframe and received an unqualified audit opinion from the NSW Audit Office.
- The ARMC commended the Finance Team for their professionalism and responsiveness throughout the process.
- The Committee also reviewed the district's financial position and discussed strategies designed to achieve if not improve the forecasted \$43 million unfavourable result for FY2026.
- The Chair outlined the implementation of the Ministry of Health's new Internal Control Framework which aims to strengthen accountability across Local Health Districts. The framework supports compliance with Treasury and Ministry obligations and includes the Internal Control Deficiency Register (ICDR). Implementation challenges are being addressed, and the framework remains a standing item on the ARMC agenda.
- Confirmed that the Internal Audit function has adopted a 12-month rolling audit plan, revised biannually using an agile, risk-based methodology. This approach enables responsiveness to emerging risks and operational changes. Recent audits requiring agile responses included financial management at Concord and issues related to waiting lists at Canterbury. The Chair noted increasing demand for financial audits due to ongoing budgetary pressures and confirmed that the agile model is proving effective.
- The Chair (ARMC) continues to monitor SLHD's risk management framework, aligned with ISO 31000:2018.
- Regarding current Cyber Security risks, the ARMC Chair confirmed that the:
 - Committee reviews physical, cyber, and ICT security risks.
 - Business continuity and disaster recovery planning are regularly assessed.
 - A program of work is underway to strengthen cyber resilience.
 - Role clarification is being sought from eHealth regarding cyber responsibilities.
- The Chair (ARMC) highlighted that funding and skilled workforce availability remain challenges. She commended the current Director for advancing SLHD's cyber maturity.
- The Chair (ARMC) also discussed the identification of the following emerging risks:
 - SDPR impact on SLHD resources
 - Funding sources for Virtual Hospital
 - Centralisation of corporate functions
 - AI-related risks and opportunities
- The Chair (ARMC) invited questions from Board Members. The Board Chair thanked Ms Brus for her leadership and dedication to the work of the Committee.
- The Chair (ARMC) extended her thanks to Board members Dr Mary Haines and Mr Raymond Dib for their participation in recent Audit and Risk Committee meetings.

8.3 Safe Haven -Summary Report on Achievements – Action Item

The Board received, read and noted the documents.
The Board was impressed with the achievements of Safe Haven.

8.4 Response to NSW Ombudsman

The Board received and noted the report

ACTION: The Board confirmed that formal response to Ombudsman recommendations be completed within the three-month timeframe.

8.5 SLHD Facility Strategic Plans – for Board Consideration

To be held over to November Board Meeting

9. Chair's Report

The Board Chair reported that the Chief Executive met with the Chair of CRGH Medical Staff Council (MSC). One of the issues raised was regarding consultation on the Service level Agreement. The Chair reaffirmed that the Service Level Agreement is established between the District and Ministry of Health and is not subject to staff feedback.

9.1 Correspondence sent on behalf of the Chair

- Chief Executive letter sent to Chair Concord Repatriation General Hospital Medical Staff Council replying to correspondence on the 10 October 2025

9.2 Board Member Activities

- Balmain 140 Year Anniversary Ball, members Mary Haines and Richard Acheson attended the event.
- Research Symposium Balmain Hospital, members Ronwyn North and Richard Acheson attended the event.

10. Standing Items

10.1 Chief Executive

The Board received, read and noted this report. The following is noted:

Statewide Performance Report – August

SLHD achieved an outstanding result.

Outcome of meetings with Clinical Leadership Teams

The Secretary NSW Health requested Dr Marianne Gale and David Ananin to meet with staff at Concord Hospital to evaluate progress on the Restorative Action Plan. They met with over 100 clinicians individually and within committees.
Correspondence attached.

SLHD Mental Health Medical Staff Council

The Deputy Secretary and Executive Director Mental Health Branch, NSW Health attended the SLHD Mental Health Medical Staff Council.

People Matter Employee Survey (PMES)

SLHD had an exceptional participation result of 59% (7501 staff).

10.2 Finance

The Board received, read and noted this report.

As at YTD Sept 2025, the District was \$16.3M unfavourable to budget for expenditure and \$0.8M unfavourable for revenue.

The unfavourability was primarily driven by:

- Additional staff to support the Mental Health Service given the resignation of 25 FTE Psychiatrists
- Employee related expenses.

Revenue was \$0.8M unfavourable to YTD September 2025 budget. The district received \$1.3M in one-off payment as part of a legal matter outcome. Revenue is forecasted to be \$12M unfavourable to budget.

SLHD is working on a number of efficiency and revenue improvement strategies.

10.3 Operations

The Board received, read and noted this report.

10.4 Safety and Quality and Medical Services

The Board received, read and noted this report.

10.5 Medical Services

The Board received, read and noted this report.

10.6 Nursing and Midwifery Services

The Board received, read and noted this report.

Board Secretary to schedule a meeting with Executive Director of Finance and Executive Director Midwifery and Nursing and Board member to clarify Nursing Hours Per Patient Day.

10.7 Facility Reports - General Managers

The Board received these reports.

The Board noted the Oral Health and Dental Services.

10.8 Selected Performance Indicators – August 2025

The Board received, read and noted this report.

10.9 Workforce (Quarterly)

The Board received, read and noted the report.

10.10 Digital Health and Innovations (Quarterly)

The Board noted this report was tabled at the June Board meeting.

10.11 Capital Infrastructure and Engineering (Quarterly)

The Board noted the report was tabled in the August Board meeting.

10.12 Risk Management (Quarterly)

The Board noted this report was tabled at the July Board meeting.

10.13 Detailed Asset Management Report (Quarterly)

The Board noted the report was tabled in the August Board meeting.

10.14 Detailed Cyber Security Report (Six Monthly)

The Board noted the report was tabled in the August Board meeting

11. Board Committee reports / minutes

11.1 Finance and Performance Management Committee

The Board received, read and noted the minutes of meeting held on 8 September 2025.

11.2 Research Board Subcommittee

The Board received, read and noted the minutes of meeting held on 15 September 2025.

11.3 Audit and Risk Committee

The Board received, read and noted the minutes of meeting held on 8 September 2025

11.4 Patient Safety and Quality Board Subcommittee

The Board received, read and noted the minutes of meeting held on 25 September 2025

11.5 People and Culture Board Subcommittee

The Board noted the next meeting will be held on 20 October 2025

11.6 SLHD Clinical Council

The Board received, read and noted the minutes of meeting held on 24 September 2025

11.7 Medical Staff Executive Council

The Board noted the next meeting will be held on 7 November 2025

11.8 SLHD Consumer and Community Advisory Council (bi-monthly)

The Board received, read and noted the minutes of meeting held on 11 September 2025

11.9 Aboriginal Health Steering Committee (bi-monthly)

The Board noted the next meeting will be held on 25 November 2025

12. Matters for Noting

12.1 Sustainability Committee (bi-monthly)

The Board noted the minutes of the meeting held on 25 September 2025.

12.2 Medical and Dental Appointments Advisory Committee

The Board noted the minutes of the meeting held on 10 September 2025.

12.3 Finance Leaders Forum

The Board noted the minutes of the meeting held on 17 September 2025

12.4 NSW Health / SLHD Performance Review Meeting

The Board noted the next meeting will be held on 5 November 2025

12.5 Organ Donation for Transplantation

The Board received, read and noted the minutes of meeting held on 23 September 2025

12.6 Major Procurement, Assets and Imaging Steering Committee

The Board noted the next meeting is to be advised.

12.7 Yaralla Estate Community Advisory Committee (quarterly)

The Board received, read and noted the minutes of meeting held on the 26 August 2025.

12.8 Security and Violence Prevention Committee

The Board noted the next meeting will be held on 16 September

12.9 Health Equity Research & Development Unit

The Board received, read and noted the report.

12.10 SLHD Board Presentation Schedule

The Board noted the schedule and was placed in the reading room.

12.11 SLHD Board Social Calendar

The Board noted the schedule and was placed in the reading room.

13. Business without Notice

14. In Camera Session

The Board received, read and noted this report.

15. Next Meeting

The next meeting will be held on Monday 17 November 2025 at 8.30 - 11.00am at KGV

16. Board Meeting with Concord Repatriation General Hospital (CRGH) Medical Staff Council and Clinical Council Representatives

Attendees

Mr Anthony Dombkins – Chair CRGH Clinical Council
Dr Stewart Condon – Member CRGH Clinical Council
Mr Alan Mc Phail – Consumer Representative CRGH Clinical Council
Ms Melisande Thawley - Member CRGH Clinical Council
Ms Nicola Riley - Member CRGH Clinical Council
Ms Melinda Pestana - Member CRGH Clinical Council
Dr Cameron Korb-Wells - Member CRGH Clinical Council
Dr Winston Cheung – Chair CRGH Medical Staff Council

All attendees introduced themselves at the commencement of the meeting.

The Chair acknowledged the history of CRGH and ongoing importance to the community.

General Manager CRGH Anthony Dombkins presented the following:

- Highlighted the top three priorities for the CRGH Clinical Council being Workforce and Staff Wellbeing, Quality and Safety and Governance and Budget on Performance.
- An increase in demand for geriatric inpatient beds. A key obstacle contributing to this issue is the limited availability of aged care facilities to support timely patient discharge.
- An emphasis on the critical role of Allied Health in addressing care-related issues for elderly patients and their family.
- Noted imminent changes to the Commonwealth Aged Carers Act.

Alan McPhail reported the following:

- It has been a challenge to get more consumer representatives.
- Noted the importance of education of junior medical staff in relation to Aged care
- Consumer feedback has been positive, and all are aware of the aged care crisis
- More engagement with the Culturally and Linguistically Diverse Community organisations to increase representation
- Updating signage to help patients find their way more easily around our hospital

Dr Winston Cheung reported the following:

- Highlighted three key issues currently impacting the broader community:
 - an ageing population placing increased demand on health services

- the rapid introduction of costly new technologies
- the ongoing deterioration of primary care systems.
- He noted that these challenges require long-term planning, including the development of future-focused health strategies and a renewed emphasis on strengthening primary care.
- Presented at the RPA MSC with the Secretary NSW Health in attendance. He identified two issues of concern: budget funding and culture. He advised that last year's PMES results for bullying were 16% and needed to be addressed. The Board Chair will raise this issue at the People and Culture Committee.
- NSW Ombudsman Report findings -sent a letter to the NSW Health Secretary regarding the outcome and is waiting for a response.
- Dr Cameron Korb Wells reflected on the challenges of delivering clinical care to elderly patients under current constraints. He posed the question of how the organisation is preparing for the future and how the operational plan aligns with the strategic plan to ensure sustainable service delivery.

The Chair thanked the clinical team and declared the Board Meeting closed at 12.30pm



Board Chair, SHLD

Date:

17.11.25