
Minutes

Ordinary Meeting of the Board of the Far West Local Health District

Date: 26 April 2021

Time: 10.15am CST (10.45am EST)

Venue: Auditorium, First Floor, Broken Hill Community Health Centre

Present:

Dr Andrew Refshauge	Chairman
Mr Stephen O'Halloran	Board Member
Mr John Harris	Board Member
Mr Wincen Cuy	Board Member
Mr Paul Kemp	Board Member
Mr Umit Agis	Chief Executive
Dr Olumuyiwa Komolafe	Staff Specialist

Videoconference:

A/Prof Lilon Bandler	Board Member
Ms Mariette Curcuruto	Board Member
Dr Michelle Dickson	Board Member
Ms Sally Pearce	Board Member

In Attendance:

Mr Muku Ganesh	Director Performance and Strategy
Ms Louise Heffernan	Workplace Culture Coach
Ms Hannah Everuss	Board, Committees and Policy Clerk (Minutes)

Meeting Opened 10.17 AM CST/ 10.47AM EST

Item 1. Acknowledgement of Country

The Far West Local Health District acknowledges the traditional owners of the lands within its boundaries including: the Barkandji; the Muthi Muthi; the Wilyakali; the Ngiyampaa; the Wadigali; the Malyangaba; and the Wangkumara. We acknowledge and pay respects to the Elders past and present and their ancient wisdoms. We also acknowledge the communities of today and the Aboriginal community members who are part of our communities.

Item 2. Apologies

Nil.

Item 3. Disclosure of Interest

Nil to add.

Item 4. Order of Business/Urgent Business

Nil.

Item 5. Minutes of Ordinary Board Meeting 29 March 2021

Resolution: **The Minutes of the Ordinary Board meeting held on 29 March 2021 be received as a true and correct record.**
Moved Stephen O'Halloran, seconded Sally Pearce. Carried.

Item 6. Action List

6.1 19_20 – Acknowledgement of Country – Comprehensive maps

Action item is ongoing, Paul Kemp advised that the timeframe in knowing the definite boundaries is uncertain as not all traditional owner groups having been granted native title at this stage, they are identified on the indigenous map however the true and correct boundaries are yet to be determined. This process can take some time. To be completed out of session.

6.2 21-22 Provide Feedback to Balranald Transport Officer

Positive feedback provided to employee, Balranald Transport Officer, via letter.

6.3 21 – 24 Lead Program Update

Included in TAB 3.

Noted. The Committee discussed the funding for the program. The funding is continuous for the program however the contribution made by the mines is at their discretion. The funding has continued for some years however is not guaranteed. Currently there has been no indication of this ceasing in the near future.

6.4 20 – 38 - Audit and Risk Committee

The Board discussed membership of the FWLHD Audit & Risk Committee. It was noted that Sally Pearce is on the prequalification list of the people who can be on an Audit & Risk Committee as per Treasury policy. The Board require clarification regarding this.

Action: Internal auditor to provide CE with Brief out of session regarding the membership of the Audit and Risk Committee.

Item 7. Reflections on our Care

Item 7.1 Patient Story

Noted. The Board discussed the inclusion of students in the training to collect patient stories. The Chief Executive confirmed that this was the plan, training sessions will continue throughout the year.

Item 7.2 Staff Story

Noted. The Board discussed the importance of encouraging and harvesting ideas. The Chief Executive agreed that this was needed at every level of the organisation. It was noted that training regarding correct ways of providing feedback was also important. This task has been incorporated into the Director of Innovation role. The staff stories are tabled at the Executive meeting and any issues that are raised are addressed.

Item 8. Chief Executive Report

Item 8.1 KPI Dashboard Report

Noted. The Board discussed the elective surgery wait times. The Chief Executive explained these had been blown out due to COVID. Funding has been provided by Health to address these. More surgery time has been established for Gastroenterology and Ophthalmology to address category one overdue and extra sessions have been implemented to address category two. This will address the current overdue theatre lists however it is unknown what may present in future and what future lists will look like. What surgery time will be needed ongoing for the next twelve months is unknown and beyond the current strategy. The FWLHD is working toward knowing predictively what is required for future lists.

Item 8.2 Chief Executive Report

The Chief Executive went through the report noting key points:

- There have been no new cases of COVID - 19 in the FWLHD. Vaccinations clinics had commenced on the 24th of March 2021 of category 1A and 1B LHD staff throughout the FWLHD. However the Astra Zeneca vaccine is no longer recommended for under fifties. Astra Zeneca is still recommended for those over fifty who do not have any medical concerns and fully consent. The LHD has seen a massive drop out of people getting the vaccine. Staff are wanting to wait for Pfizer to be available to them. The FWLHD has encouraged staff to make their own informed decision about the vaccination. Regular meetings are being held with the MoH and the vaccination role out team regarding the Pfizer vaccination rolling out to regional settings. Initially there was a concern that the Pfizer only had a seven day life span once it came out of deep freeze state however can now be stored in normal refrigeration for fourteen days. We are awaiting the clear plan for what vaccinations are recommended for who with planned meetings to occur later this week before resuming mass vaccinations clinics.
- The Commonwealth are encouraging general practitioner and respiratory clinics deliver the vaccine to the general public where possible. However the State will now have a formal role in vaccinating the Category 2A population, being the majority of over fifties. Our key partners in the role out of the vaccine to the broader community will be Maari Ma, CHAC and RFDS. Maari Ma have commenced vaccinations in Wilcannia. The FWLHD is awaiting the COVAX booking system/app being rolled out to the broader community. NSW eHealth are being pushed to have the app available for all of NSW Health as it is already available to those in Victoria and Western Australia.

A/Prof Michelle Dickson joined the meeting 10.35AM CST/ 10.55AM EST

People and Culture

Workforce

- Health X employees will soon complete their tenure, we are hoping to retain some of these employees in Broken Hill. The CE explained that the casual nurse pool is always a challenge for the FWLHD as there are not usually casual nurses readily available in the region. Often the part time workforce will pick up extra shifts. In some departments overtime is used to backfill sick leave. In this instance NUMs are required to make the decision regarding risk. It is known that remote areas are experiencing nursing staff shortages particularly in traditional nursing positions. Agency nurses are currently challenging to recruit due to the number of short term and seasonal contracts available in the COVID climate.

Aboriginal Workforce Strategic Plan

- The draft Aboriginal Workforce Strategy will be tabled at the Workforce and Development meeting on 7 May 2021 for review. Umit is currently reviewing the draft plan.

Dr Olumuyiwa Komolafe joined the meeting 10.55AM CST/ 11.25AM EST

Clinical Targets

- A review of the Scene Within Benchmark results (Triage 2 and 3) and a review of the present staff skill mix in the Emergency Department at Broken Hill has indicated a need for more specialised training for the Emergency Department staff in Advanced Life Support (ALST). There will be additional ALST training sessions provided as well as additional face-to-face education packages in Triage.

Overdue Surgery

- There were sixteen (16) Category 2 elective surgery patients and Fifty one (51) Category 3 patients overdue at the end of March 2021. Total overdue = 67, including:
 - Ophthalmology – 20
 - Orthopaedics – 40 (Joints:19 and Non-Joints: 24)

Action:

An additional two Cataract Theatre lists are planned for the 2nd and 3rd June which should result in no overdue Cataracts. Additional theatre dates have been offered for Plastic Ophthalmology however have not been confirmed at this time.

An additional session for Upper Limb Orthopedic Surgery has been arranged for the 15th April, and an extra half day orthopedic list has been booked for the 30th April.

Additional three (3) Gastro Sessions are due for scopes in April with an additional three (3) sessions listed for May. Dr Gleeson has been offered additional theatre time between June and December 2021.

Allied Health, Partnerships and Innovation

- The Chief Executive reported that the virtual pharmacy trial has come to an end. The feedback has been very positive in regard to our service in this area. A request has been received to extend the service, it will continue in the short term. Virtual pharmacy supports continuity and integration of care and is beneficial for staff to receive immediate information addressing the previous gap identified. We are currently advertising a senior Pharmacist, the position has been graded as a HSM level four.
- The FWLHD and Sydney LHD/Royal Prince Alfred Hospital Executive teams have met to discuss the opportunity to forge closer relationships and governance structures to mutually benefit. The FWLHD requires an Intensivist to run the eICU service we have currently been planning whilst offering further opportunities for staff

exchange, staff development and knowledge exchange. The FWLHD has explored the need for a rotational anaesthetist and emergency doctors particularly Registrars in which RPA could supply. A working group has been developed to focus on this as well as a learning and development group focusing on staff development and the eICU project.

Mental Health Drug and Alcohol

- The Chief Executive reported that the 'Yes' national consumer survey results had been released over the weekend. The FWLHD MHD&A service topped the list for the second year running.

Action: Board to congratulate MHDA team formally via letter for 'Yes' survey results.

Clinical Operations

- Work is underway with the ED leadership team to address a range of matters that impact on the ETP performance including triage timeliness, medical decision making and movement of patients from ED to the wards. The Director of Nursing and Midwifery and the Director of Clinical Operations has been tasked to address the skill mix in ED to ensure that it is correct and spread. Improvements in rostering are also required. The Chief Executive advised that the business process is not aligned with achieving targets. The team leader nurse is currently also completing the triage. However it is believed that the team leader nurse needs to be on the ground to address triage 1 to 3.
- The Outpatient Department is currently undergoing a fundamental level review. The OPD is currently reviewing Medicare billing practices. The OPD will be revising the prioritisation process of the waitlists, as well as the interface with Specialists and the hospital, business systems will be required to change to support virtual care and be effective as well as improve the staff experience. It has been identified that a number of departments are required to oversee the OPD collaboratively for it to run effectively, namely the DONM, Clinical Operations Director and the Director of Medical Services. Previously the management of the department had been siloed and this in particular has caused issues in the past.
- The Chief Executive and the Board welcomed Jane Bostock to the Director of Clinical Operations position.

Other Business

- Health Infrastructure visited the Wentworth Hospital and completed a brief for the MoH. The Ministry is aware that the current building and infrastructure at Wentworth Hospital are not suitable for the type of service the FWLHD would like to deliver. Funding was unable to be secured previously however the FWLHD has been asked to develop a service plan on the multipurpose model. The MoH have engaged an external consultant to complete this process which is a huge advantage for the FWLHD and will be considered by the Minister in the May budget.
- The Chief Executive explained that a Memorandum of Understanding has been signed in agreement to share patient information with external partners in Wilcannia with Maari Ma and RFDS at the Multi-Purpose Service. This was necessary to ensure continuity of care by allowing access to the medical record whilst ensuring confidentiality.

- The Clinical Excellence Commission (CEC) will be visiting the FWLHD to provide an in service to the Board around Safety and Quality. The CEO Carrie and two clinicians, Dr Jim Mackie and another will visit at this time. They can be asked questions regarding reviews that have been completed for the FWLHD in the past.
- The Federal inquest into rural health will be held in Broken Hill on 3 November 2021 in response to local Member for Parliament rallying parliament to include Broken Hill in their visits for parliamentary hearings as a place for the community to voice their concerns.
- The Service Level Agreements meeting has been delayed by four weeks. Treasury is still finalising their concerns.
- The CE advised that the FWLHD is pursuing the appointment of Professor David Lyle as the head of FW LHD research under his current tenure as the joint academic appointment between Sydney University and FWLHD. This will provide leadership and stewardship for the upcoming Medical Research Future Fund (MRFF) research hub proposal between WNSWLHD and FW LHD. The Board discussed further opportunities within the Far West could include qualitative research into rural, remote health and Indigenous healthcare and for students to help support staff complete PHDs increasing attraction and retention to health positions in the area.
- The Chief Executive advised that systems had been put in place to further support staff during the inquest hearing that commenced on 19 April 2021. It was acknowledged that it had been a very hard time for many staff. The nursing model in ED has been highlighted as an issue. The DCO, DONM and DMS have been asked to address the model of care and effect change where needed, supporting the ED team along the way. At the last review meeting with the Ministry the FWLHD expressed that it does not feel that the ED is currently fit for purpose. The LHD has a meeting scheduled with Health Infrastructure and will be putting our wish list forward in regard to the capital project improvements required in the ED.

Wincen Cuy left the meeting at 12.12PM CST

Aboriginal Health; Planning and Community Engagement

- The Consultant Claire McKendrick has commenced her consultation process in the development of the Aboriginal Health Framework, Claire and her team will be continuing to complete the plan. During the Strategic Planning day great feedback was received around Claire's work. A comprehensive plan has been provided to the Chief Executive around engaging staff, community, partners and the Board. A small steering group will be created to help the consultants develop the final product which should be available for the Board meeting in July 2021. The Chief Executive and Claire discussed the need to have a Board member on the Steering Group to provide visibility to the Board. As one of the LHDs separate strategies includes Aboriginal Health the CE has asked for consideration for one of the aboriginal board members to join the Steering Group.

Action: Paul Kemp and Michelle Dickson to join the Strategic Plan Steering Group in a joint capacity to support the project.

Resolution: The Chief Executive Report be received and noted.

Moved John Harris, seconded Wincen Cuy. Carried.

Wincen Cuy re-joined the meeting at 12.20PM CST

Lunch Break 12.35PM CST/ 1.05PM EST – 12.58PM CST/ 1.28PM EST

Item 9. Aboriginal Health

Item 9.1 Clinical Services

Item 9.1.1 Comparative DAMA Rates

Noted.

Item 9.1.2 Comparative DNW Rates

Noted.

Item 9.1.3 Admission rates compared with population numbers

Noted.

Item 9.1.4 Smoking during pregnancy comparative rates

Noted.

Ms Mariette Curcuruto re-joined the meeting 1.01PM CST/1.31PM EST

Item 9.2 Workforce

Item 9.2.1 Workforce participation rates

Noted. The Committee discussed the Workforce participation rates and requested an analysis at the next Board meeting regarding the separation trends of the Aboriginal Workforce.

Action: Workforce separation analysis to be tabled at May 2021 Board meeting.

Item 9.2.2 Progress on the Reconciliation Action Plan (RAP)

Nil - quarterly report.

Item 9.2.3 Workplace Culture and Wellbeing Survey 2020 Presentation – Louise Heffernan, Workplace Culture Coach

Noted. The Committee discussed the responses received in comparison to the People Matters Survey, provided suggestions on how to communicate the feedback received from the survey to staff and the actions taken to address this.

Item 10. Presentation – Pillar Two – Corporate Governance

Item 10.1 Mr Muku Ganesh, Director Performance and Strategy

The Board passed on their congratulations to Muku on his permanent appointment to the role of Director, Performance and Strategy for the FWLHD.

Muku Ganesh presented on pillar two, Corporate Governance. The main points of the presentation were:

- The role of the pillar is to strategically manage assets, provide financial performance and stability, manage ICT systems including cyber security, oversee

clinical data, corporate records and information management, conduct strategic procurement and manage the enterprise risk to the LHD.

- Corporate Governance sits within the organisational structure and is governed by the Corporate Governance Committee (CGC) which is escalated to the Operational Executive Committee (full FWLHD Executive), the Director of Performance and Strategy is a member of the Operational Executive and reports to the Chief Executive.
- The Director of Performance and Strategy has direct reports from the Finance Department, Senior Manager Health Information, Senior Manager Assets, Facilities and Support Services, Chief Information Officer (Hosted by WNSWLHD) and Procurement, Contracts and Fleet Manager.
- The controls and opportunities of some of the Strategic risks are identified by the Corporate Governance Committee. The risks that were discussed were the lack of clinical information interface between operating IT systems (SR LHD 3), the inability of the LHDs infrastructure and assets to support the provision of high quality healthcare (SR LHD 4), inability to maintain sustainable operations (SR LHD 5), Inability to supply adequate LHD staff accommodation to senior staff in Broken Hill (SR LHD 13).
- It was discussed that the FWLHD due to its small size can be agile and used as the test bed for some statewide projects as a benefit for the LHD. To try fit for purpose models, for example the sustainability strategy and solar panels for the Broken Hill Base Hospital. The FWLHD updated their sustainability policy and was then granted funding to go ahead with the solar panel project.
- The Director of Performance and Strategy is exploring the opportunity to offer apprenticeships and internships within the Directorate and source Commonwealth funding to support this if it aligns with our workforce needs and models.

Item 11. Board Sub Committee Reports

Item 11.1 Finance and Performance

Item 11.1.1 Finance and Performance Committee Chair Report

Noted.

Item 11.1.2 Finance and Performance Committee Minutes 15 March 2021

Noted.

Item 11.1.3 Finance Report March 2021

Major items of the financial report are:

Overview

	<u>20/21</u> <u>YTD</u> <u>Actuals</u>	<u>Variance</u> <u>to</u> <u>Budget</u>		<u>20/21</u> <u>FY F'cast</u>	<u>Variance</u> <u>to budget</u>
Expenses					
Employee Related	58.714M	0.877M	F		
VMO Payments	6.1890M	0.228M	U		
Goods & Services	21.511M	0.339M	U		
Grants	2.214M	0.000M			
Repairs, Maintenance & Renewals	2.123.M	0.194M	U		
Depreciation and Amortisation	5.438M	0.000M			
Borrowing Costs	0.015M	0.013M	U		
Other Expenses	0.028M	0.010M	U		
Total Expenses	96.244M	0.095M	F	132.847M	0.332M F
Revenue					
Own Source Revenue	9.887M	1.060M	U		
Government Contributions	82.432M	0.000M			
Doubtful debts	(0.075)M	0.075M	U		
Total Revenue	92.244M	1.135M	F	124.524M	1.693M U
Net Cost of Service : Surplus/(Deficit)	(4.000M)	(1.040M)	U	7.264M	(1.336M) U
Crown Acceptance	1.526M	0.000M		2.595M	0.000M
Asset Transfers - Internal	0.000M	0.129M	U	0.170M	0.000M
Total Result: Surplus/(Deficit)	(2.474M)	(1.169M)	U	(4.499M)	(1.336M) U
Management forecast adjustments					
- COVID-19 unfunded – expected to be funded by 30 June 20				0.111M	0.111M U
Management Forecast Result Surplus/(Deficit)	(2.474M)	(1.169M)	U	(4.388M)	(1.255M) U
FTE	<u>FY21 FN11</u>			<u>Variance to Budget</u>	
	713.76*			45.61	F

*Excludes 11 HealthX agency staff.

Item 11.1.4 Financial Reports

Noted.

Key talking points from the Director of Performance and Strategy, Muku Ganesh were:

- *March 2021*
 - a. The **expenditure** result for the month of **March** is also surplus, being three months of consecutive surpluses.
 - b. The favourable expenditure position is mainly due to rolling vacancies (around 46 FTEs).
 - c. The **revenue** continues to be below target, however, consistent with the projection.
 - d. The net result is an underperformance to target by \$0.217M for the month.
- *Year-to-Date March 2021*
 - a. Year-to-date expenditure is unfavourable by \$0.079M (favourable by \$0.051M for February), including COVID-19 of \$0.173M. However, the March expenditure also includes computer replacement cost of \$0.450M.
 - b. The favourable employee related expenditure position (due to the vacant positions) has fully offset by the unfavourable G&S expenditure.
 - c. Again, the Own Source Revenue continues to be a challenge and for the year-to-date the Own Source Revenue is unfavourable by \$1.060M, bring the net year-to-date result to an unfavourable position of \$1.041M (\$0.975M unfavourable for YTD February 2021).
- *Full Year Forecast*
 - a. Our full year forecast for expenditure is a favourable position of \$0.331M. However, this also include expected COVID-19 recoup of \$0.100M. Meaning that the underlying position is favourable by \$0.431M.
 - b. As a result, the full year net result will be an unfavourable position of \$1.336M (unfavourable position of \$1.202M as at end February) excluding COVID-19 related expenditure.

Activity

- The District is on track to meet the purchased ABF activities. For the eight months to February, the District have produced 7,241 NWAUs against a target of 6,768.
- State wide the activity window closes 21 days after the month end. Hence, activity will be reported with a month lag.
- The activity for the seven months to February is ahead of target by 473 NWAU.
- At the current rate the District is expected to exceed its target by 1% for the full year.

Muku Ganesh left meeting at 2.50PM CST/ 3.20PM EST.

Item 11.1.5 MoH Narrative – March 2021

Noted.

Item 11.1.6 Workforce Report

Noted.

Item 11.1.7 Headcount and FTE March 2021

Noted.

Resolution: **Finance and Performance Reports be received and noted.**
Moved Paul Kemp, Seconded Wincen Cuy. Carried

Item 11.2 Quality and Safety Committee

Item 11.2.1 Quality and Safety Committee Chair Report

Noted.

Item 11.3.2 Patient Safety and Clinical Quality Report

Noted.

Item 11.3.3 Health Care Quality Committee Minutes 11 February 2020

Noted. Not endorsed due to no Quorum for this meeting.

Item 11.3 Audit and Risk

Item 11.3.1 Audit and Risk Committee Chair Report

Nil.

Item 11.3.2 Audit and Risk Committee Minutes

Nil.

Item 11.3.3 Risk Management Unit - Work Health and Safety Report

Noted.

Resolution: **The Risk Reports be received and noted.**
Moved Sally Pearce, Seconded Wincen Cuy. Carried

Item 12. Reports for Noting

Item 12.1 Health Performance Report February 2021

Noted.

Resolution: **The Health Performance Reports for February 2021 were received and noted.**
Moved Paul Kemp, Seconded Wincen Cuy. Carried

Item 13. Reports for Endorsement

Nil.

Item 14. Business on Notice

Nil.

Item 15. Items for Discussion

Nil.

Item 16. Calendar of Events

Noted. A Board Member advised that the calendar was not correct regarding the Wilcannia Health Council dates.

Action: Check Wilcannia Health Council dates and confirm in the calendar of events.

Item 17. Correspondence

Nil.

Item 18. Other Business

18.1 Thank you received by Theatre

Noted.

Item 19. Closed Meeting

3.15pm CST/ 3.45PM EST

Item 20. Next Meeting

Monday 31 May 2021

Certified as a correct record.

Andrew Refshauge

Name

Signature

Date