
Minutes

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

Date: 28 October 2019

Time: 8.00am EST (7.30am CST)

Venue: Tibooburra Hotel, Tibooburra

Present:

Dr Andrew Refshauge	Chairman
A/Prof Lilon Bandler	Board Member
Mr John Harris	Board Member
Mr Paul Kemp	Board Member
Mr Stephen O'Halloran	Board Member
Ms Sally Pearce	Board Member
Mr Stephen Rodwell	Chief Executive
Ms Noni Inglis	Director Finance and Corporate Services

By Teleconference:

Dr Michelle Dickson	Board Member
Ms Mariette Curcuruto	Board Member

Invitees:

Ms Denise McCallum	General Manager District Health Services
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In Attendance:

Ms Jenelle Bussell	Board, Committees and Policy Clerk (Minutes)
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Closed Meeting: 8.00am EST

Meeting Commenced: 8.20 am EST

Item 1. Acknowledgement of Country

The Far West Local Health District acknowledges the traditional owners of the lands within its boundaries including Barkandji/Paakantji; the Muthi Muthi; Wilyakali; and the Ngiyampaa. 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

Mr Wincen Cuy	Board Member
Ms Diana Ferry	Executive Officer
Dr Andrew Olesnicky	Director Emergency Services BHHS

Item 3. Disclosure of Interest

Nil

Item 4. Order of Business/Urgent Business

Nil

Item 5. Minutes of Ordinary Board Meeting 30 September 2019

Resolution: **The Minutes of the Ordinary Board meeting held on 30 September 2019 be received as a true and correct record.**
Moved Paul Kemp, seconded Sally Pearce. Carried

Item 6. Action List

6.1 19-20 – Acknowledgement of Country

Paul Kemp advised obtaining a comprehensive map was ongoing.

6.2 19-23 – Aboriginal Health – Reconciliation Action Plan (RAP)

Michelle Dickson advised it was to be discussed at the Aboriginal Health Committee meeting to be held at 10.00am EST today.

6.3 19-26 – People Matter Employee Survey Results 2019

Three years of the People Matter Employee Survey Results have been added to the Diligent Library.

Complete

6.4 19-28 – Calendar of Events

Eastern Standard and Central Standard times have been added to the Calendar of Events.

Complete

6.5 19-21 – 2019-20 Service Agreement

The Chief Executive advised some of the action updates were covered in more detail in the Chief Executive report.

During implementation of s19 (2) exemptions, it became apparent that exemptions were required for each site location/facility where services are delivered. A working party has been organised to work through this.

A meeting with Roy Butler, Shooters and Fishers Party had occurred regarding GP services in the Wentworth Shire. Denise McCallum, General Manager District Health Services will provide further information in her presentation at Item 7.

Donna Cruickshank was now working one day a week at Maari Ma Health to work jointly together on the Aboriginal Health Plan.

Stephen O'Halloran questioned if agreements had been in relation to the gifting of land to Maari Ma. A list of actions to progress are listed in the Chief Executive Report. The Board and Committee members discussed staffing in Wilcannia and Ivanhoe.

Lilon Bandler declared an interest through her delivery of services at RFDS in Wilcannia on a monthly basis.

The Chief Executive advised the Infection Control position had been recruited and the successful applicant would commence in February 2020.

Facilities in Tibooburra should be completed by early November 2019, a couple of weeks ahead of schedule. The exterior of the building would also be painted. The Health Service Manager advised the works had gone smoothly thus far.

The Ministry has been consulted in relation to leasing of land at Buronga due to the unusual circumstances in acquiring land. A formal Brief is to be written in relation to the acquisition.

6.6 19-27 – Informal Afternoon tea with Maari Ma

The Secretariat advised an email had been sent to Haylee Rogers asking if Maari Ma Health Board would like to meet again in June 2020 continuing on an annual basis.

Tibooburra Health Council Members and Tibooburra Health Service Staff joined the meeting at 9.00 am EST

Present:

Ms Vivienne Fazulla
Mr John Ainsworth
Ms Sarah Burns
Mr Tim Ivone
Ms Merrawyn Townsend
Ms Michelle Dickson

Apology

Kathleen Gilby

Andrew Refshauge welcomed those who joined and explained the reason behind the meeting was to discuss any issues or concerns arising.

John Ainsworth advised the Health Service was in need of a vermin fence. A vermin fence was not included in the refurbishments. Regularly fundraisers were held for new supplies and averaged approximately \$16,000 per year. The community was very active in providing services such as SES, fire and ambulance.

Andrew Refshauge noted phone reception was a problem in the area. Vivienne Fazulla advised radios would soon be available for Ambulance Officers to wear and reception would be received as far as Cameron's Corner and into Queensland. John Ainsworth advised Ambulance NSW were fitting devices to vehicles to enhance reception. Vivienne Fazulla noted consultants had visited Tibooburra in relation to a study being undertaken in the Snowy River area in enhancing coverage.

Stephen Rodwell left the meeting at 9.17am

The Board and Committee members discussed the services that visited Tibooburra on a regular basis. Vivienne Fazulla advised a Women's Health Clinic was now available and was beneficial particularly with newborn immunisations now easily accessible.

Stephen Rodwell returned to the meeting at 9.21am

Vivienne Fazulla noted the refurbishment was progressing well and they had felt well supported by Broken Hill. A local community opening of the Health Service was planned for December 2019 with an official opening early in the New Year. Overall Tibooburra residents are happy with delivery and uses of services provided.

Item 7. Presentation – Denise McCallum, General Manager District Health Services

Denise McCallum, General Manager District Health Services introduced herself to the Board, Committee, Health Service and Health Council members. Key points of the presentation are:

- New Directorate was established with a vision to have:
 - Competent and skilled staff providing high quality care as close to home as possible.
 - Culturally safe care is provided to all members of the communities.
 - Authentic engagement with our communities to deliver services needed by the community.

Denise McCallum advised she was commencing a face to face visit with each Health Service. A District wide security audit was also about to commence.

Menindee, Ivanhoe, White Cliffs and Wilcannia were experiencing ongoing issues with power outages and access to telecommunication services. Issues in all areas were impacting on 000 emergency calls. A new phone system is scheduled for completion in Menindee in October 2019. Michelle Harkin, Chief Information Officer, is working with Telstra negotiating timeframes on fixing the signal across all areas.

Action: Denise McCallum to provide an update to Andrew Refshauge after meeting with Michelle Harkin.

The planned closure of the Ivanhoe Correctional Facility in June 2020 will impact services provided across the community.

Three staff in Menindee were recognised at the Staff Recognition Awards. Permanent Health Service Managers and Registered Nurse positions in Ivanhoe and Menindee have been filled as has recruitment of Health Service Manager positions in Wilcannia and a direct appointment of an Agency Registered Nurse in White Cliffs. Helen Murphy, from Balranald Multipurpose Service, is a finalist in the NSW Excellence in Nursing and Midwifery Awards.

Minister Hazzard visited the Wentworth Health Service on 22 July 2019 and acknowledges the need for maintenance and the upkeep costs of an aging building are a key challenge.

In Dareton, engagement with Barkandji Group to create a cultural framework for engagement across the project during ongoing post construction is a focus.

The Board and Committee members discussed the sharing of an employee across Wentworth, Dareton and Balranald to fulfil a much needed role and Obstetrics being credentialed in NSW.

The Chief Executive noted a knowledgeable presentation given by Denise McCallum in the short time she has been appointed to the role.

Item 8. Health Council Member Discussion

Tibooburra Health Council members and Health Service staff discussed matters on their arrival before the presentation at Item 7.

Recess 10.00am – 11.00am

Paul Kemp excused himself from the remainder of the meeting.

Item 9. Reflections on our Care

Item 9.1 Patient Story

Lilon Bandler noted the story provided from 2011 was outdated and the story takers should be mindful of the timeframes of the stories provided. The Chief Executive noted the story was relevant to the site visit, however not current.

Item 9.2 Staff Story

The Board and Committee members discussed the staff story and the sensitivity felt through the story.

Action: Circulate the video “Small acts of Kindness” to Board members provided in My Health Learning.

Item 9.3 Clinical Governance

Item 9.3.1 Health Care Quality Committee Chair Report

Lilon Bandler noted a need for a shift of culture around clinical governance and safety and the need for Committee members to think of the opportunities in examining the data provided. Perception needed to be shifted from a tendency to see the process of examination of, for example SAC 1 and SAC 2 data, as not looking for someone to blame, but an opportunity to improve. Lilon Bandler noted there is a place within the Health Care Quality Committee to change that approach.

Lilon Bandler acknowledged Kimberley Flood, Patient Safety and Clinical Quality Manager for her work in addressing those cultural issues and informed the Board and Committee members her position/role had now been included on the Health Care Quality Committee membership.

Lilon Bandler advised the gap analysis for accreditation was due at the end of the month and there did not seem to be any major issues arising.

Mariette Curcuruto left the meeting at 11.27am

The Chief Executive noted the Safety Quality Account was also nearly complete and would be forwarded to the Ministry before the end of October 2019.

Item 9.3.2 Clinical Governance Report

The Board and Committee members discussed the KPI report noting the medication incidents seemed unusually high. Sally Pearce questioned if the rise was due to an increase in errors or an increase in reporting.

Pressure Injuries were slightly down. The Chief Executive noted the need to move towards zero tolerance for falls and pressure injuries was important.

The Board and Committee members discussed the Clinical Governance Report in particular My Health Learning compliance. Sally Pearce noted the lack of mandatory training compliance was of concern. The Chief Executive advised that occupation specific mandatory training may not be fully accurate due to trained employees sitting in different occupations, however, fire and security training for example should be accurate.

Resolution: The Clinical Governance Report is received and noted.
Moved John Harris, seconded Sally Pearce. Carried

Item 10. Chief Executive Report

10.1 KPI Report

Noted

10.2 Chief Executive Report

Key points from the Chief Executive Report:

- The current Full Time Establishment (FTE) for the District at FN04 is 703. This is 33 below the budgeted staff establishment of 736.10 FTE.
- A performance of **Grace under Pressure** will be held on Friday 8 November 2019 for all Broken Hill Clinicians. This is live theatre to be held at the Broken Hill Musicians Club from 5.30 until 9.30pm. The theatre brings to the fore well recognised pressure points experienced by Clinicians in a humorous way and opens conversation and encourages cultural change within health professions.
- There are six RCA's currently in progress and nine clinical Reviews in progress.
- Sonography examination inaccuracies have been identified through an audit process and linked back to one Clinician in Broken Hill Health Service Radiology Department over a four year period. The Clinician is currently on restricted practice – radiography examinations only, to limit any clinical risk, with an internal investigation to be completed by end September 2019 managed under the Policy – Managing Concern or Complaints About Clinicians. The District initially experienced difficulties obtaining an external reviewer. A Chief radiologist from Sydney LJHD has agreed to perform the review with is expected to be completed by 30 September 2019.

The Chief Executive advised advice from the Ministry on how to cope with the issues arising from the situation was being sought.

- Two SBATs have been nominated for the Far West Business Awards. The awards will be presented to nominees and award recipients at a Gala night in November 2019.
- Recruitment for the 2020 SBAT positions will commence in November 2019. 20 positions will be offered throughout the district, including identified Aboriginal positions.
- Recruitment to the 2020 New Graduate RN/RM Program is in progress. The District will have 32 positions for 2020 across Broken Hill, Wentworth, Ivanhoe, Balranald, Tibooburra, Wilcannia and Dareton. Letters of offer for all new graduates will go out on 28 October 2019.
- Drought package funding will be utilised to create 2 Mental Health peer worker positions. These positions will link in with the RFDS, and Lifeline coast to coast "we got your back program" and the LHD RAMHP positions.

John Harris left the meeting at 11.23am and returned at 11.26am

The Chief Executive advised the action to be taken for approval to gift the land to Maari Ma are:

- 12 September 2019 – Ministry of Health approved direct transfer to Maari Ma Health Aboriginal Corporation for nil consideration of approx. 500m² of land on the Wilcannia MPS campus, subject to:
 - Formal government approval;
 - Successful subdivision of the subject land from the main site including obtaining development approval from the Central Darling Shire Council; and

- The proposal being cost neutral to the District ie. all costs, for example, survey, subdivision, planning, demolition, legal and utility/infrastructure costs are to be funded by Maari Ma.
- 19 September 2019 – Request informally submitted to NSW Department of Planning, Industry and Environment (DPIE – formerly Property NSW) for approval to the disposal (in line with Premier’s Memorandum 2012-20).
- 1 October 2019 – Request formally submitted to DPIE for approval to the disposal.
- 2 October 2019 – DPIE advise we must submit a paper to the next Property Strategic Collaboration Committee (PSCC) for endorsement to the direct transfer.
- 25 October 2019 – Date of next PSCC meeting. The submission is tabled to be heard at this meeting. The submission paper is almost finalised and the final must be with DPIE by COB 17 October 2019.
- On receipt of PSCC’s endorsement (assuming endorsement is the outcome, which we are expecting to be the case), the Minister for Health will be requested to write to the Treasurer (the Ministry will prepare the Brief and letter for the Minister) requesting approval to transfer the land for nil compensation (in line with Treasury Direction 469.1)
- On receipt of the Treasurer’s approval to transfer the land for nil compensation (assuming approval is the outcome), the Ministry will advise the District that all government approvals are in place and the process of subdivision of the surplus land from the main lot can be formalised to progress the gifting of the land.

The Chief Executive noted the top risks facing the LHD are:

- Reputational damage.
- Legal claims and potential medico legal action.
- Small sites solution re: Medical Director and eMR.
- Medical Specialist staffing – consistency with services provided by locum workforce.
- LHD financial performance against established budget.
- Industrial relations.
- Wentworth GP services.
- NBN rollout and replacement of fixed telephone lines in remote communities.
- Internet and mobile phone access in remote communities, including impact on recruitment and retention, and staff safety.

The Chief Executive advised responses for the 30 recommendations in the Medical Services Recommendation Report had been received.

Action: Secretariat to circulate the latest responses in the Medical Services Recommendation Report to the Governing Board members.

Resolution: The Chief Executive Report be received and noted.
Moved Sally Pearce, seconded Lilon Bandler. Carried

Item 11. Aboriginal Health

11.1 Aboriginal Health Committee Chair Report

Michelle Dickson advised the Aboriginal Health Committee had met earlier in the day and was pleased to note the advances being made in collaboration with Maari Ma.

John Harris left the meeting at 11.41am – 11.43am

Michelle Dickson reminded Board members examples of the Reconciliation Action Plans had been circulated and time would be included in the Respecting the Difference face to face training on 25 November 2019 to workshop the vision statement.

The Aboriginal Health Committee Terms of reference were submitted to the Board for endorsement however Donna Cruickshank was working on the process of putting out an expression of interest to go across the district to encourage one or more community members to join the Committee.

Lunch Recess 11.50am to 12.00pm

Item 12. District Performance

12.1 Finance and Performance Report

12.1.1 Finance and Performance Committee Chair's Report

Noted

12.1.2 Finance Report

Noni Inglis provided the Board and Committee members with highlights from the Finance and Performance Report.

General Fund	<u>FY19 YTD</u>	<u>Variance to Budget</u>
Result for the Year	\$0.636M Deficit	\$0.284M U
Total Expenses	\$30.906M	\$0.777M U
Employee Related	\$18.764M	\$0.537M U
VMO Payments	\$2.024M	\$0.232M U
Goods & Services	\$7.469M	\$0.013M U
Grants	\$0.597M	\$0.000M
Repairs and Maintenance	\$0.403M	\$0.008M F
Depreciation and Amortisation	\$1.644M	\$0.000M
Borrowing Costs	\$0.002M	\$0.000M
Total Revenue	\$29.775M	\$0.433M F
Full Year Projection	\$2.908M Deficit	\$0.000M
FTE	<u>FY19 FN06</u>	<u>Variance to Budget</u>
	700.63	36.82 F

1. Financial Risks

The financial risks identified throughout the year that lead to the expenditure overrun were identified as being:

- Short term / high turnover of Medical workforce in the BHHS Emergency Department.

- Shortage of senior nurses / reliance on agency model.
- The growth in FTE.
- Premium employee related costs such as Agency Medical and Agency Nursing and overtime costs continue to inflate the employee related costs.
- The additional costs in goods and services expenses (Agency Fees, Travel & Accommodation) as related to the premium labour workforce.

2. Mitigation Strategies to Resolve Financial Performance Issues

- Monitor, review and reconciliation of FTE.
- Monthly performance meetings between Finance and Cost Centre Managers. With CE & DOFC meeting with the Top 3 poorest performing cost centre managers to discuss mitigation strategies to be implemented.
- Adding internal controls into the recruitment process such as Finance approval before recruiting – Procedure to be implemented.
- Graduate Nurses recruitment strategy.
- Implement Medical Workforce plan – to stabilise ED medical officers.

The Committee members discussed the mitigation strategies, in particular projected costs of using agency staff. Noni Inglis advised the use of HealthX Agency was beginning to generate savings. There were now seven nurses employed with more to follow.

The Board and Committee members discussed the effects of an influx of senior staff retiring and further reliance on agency staff.

The Chair questioned how savings could be made with a continual slow rise in the use of agency staff. Noni Inglis advised the recruitment of new graduates and junior staff would eventually grow a more senior workforce, however keeping junior staff in the area was also a challenge.

3. Activity

Activity data for selected items for the reporting and prior months are:

FWLHD Activity	Sep-18	Oct-18	Nov-18	Dec-18	Jan-19	Feb-19	Mar-19	Apr-19	May-19	Jun-19	Jul-19	Aug-19	Sep-19
<u>Emergency Department</u>													
Presentations	2,393	2,443	2,333	2,183	1,964	1,945	2,047	2,108	2,166	2,194	2,520	2,404	2,365
Did not Wait	65	95	101	83	77	69	47	39	42	50	60	81	84
Did not Wait%	2.72%	3.89%	4.63%	3.80%	3.92%	3.55%	2.3%	1.85%	1.94%	2.285%	2.38%	3.37%	3.55%
Aboriginal Did not Wait	18	19	23	22	28	17	6	9	7	3	12	13	12
Aboriginal % Did not Wait	5.33%	5.15%	5.94%	5.93%	7.59%	6.56%	1.88%	2.69%	1.92%	0.96%	3.32%	3.27%	3.24%
<u>Admitted Patient Discharges*</u>	320	366	319	275	324	331	354	343	353	355	388	371	347
Discharged at Own Risk	8	15	12	10	17	13	15	9	9	16	10	11	12
%Discharged at Own Risk	2.50%	4.10%	3.76%	3.64%	5.25%	3.93%	4.24%	2.62%	2.55%	4.51%	2.58%	2.96%	3.46%
<u>Aboriginal Admitted Patient Discharges*</u>	47	53	44	48	61	50	54	51	65	43	48	54	51
Aboriginal Discharged at Own Risk	1	10	4	4	8	8	10	3	3	10	5	4	5
Aboriginal % at Own Risk	2.13%	18.86%	9.09%	8.33%	13.11%	16.00%	18.52%	5.89%	4.62%	12.11%	10.42%	7.41%	9.80%
Aboriginal Discharged Between 9am-4pm	1	9	0	3	5	6	6	3	2	5	3	3	3
Discharged Between 4pm – 9am	0	1	4	1	3	2	4	0	1	5	2	1	2
Bed Days (Available Beds = 141)	2,479	2,366	2,278	2,216	2,333	2,292	2,407	2,345	2,490	2,445	2,504	2,347	2,351

Bed Days %	59%	54%	54%	54%	54%	51%	53%	58%	55%	55%	55%	57%	58%	57%	54%	56%
<u>Surgery</u>																
Elective	143	163	177	122	67	158	165	134	160	137	193	150	123	150	123	
Emergency	36	31	32	28	45	35	23	37	35	32	35	46	29	46	29	
<u>Radiology</u>																
Call Backs	72	56	65	69	75	75	76	65	65	70	66	61	63	61	63	
<u>Salary Packaging</u> Take up rate %	64.21%	63.54%	66.42%	67.02%	67.03%	65.37%	57.97%	61.00%	61.69%	62.32%	62.74%	63.54%	64.03%	63.54%	64.03%	
<u>Private Patient</u> Take up rate	144	141	125	120	94	119	131	149	155	127	163	131	115	163	131	
<u>Private</u> <u>Patient Conversion</u> <u>rates</u>																
FWLHD	88.19%	91.49%	94.40%	94.17%	95.74%	93.28%	91.60%	90.60%	93.55%	90.55%	95.71%	94.66%	95.65%	95.71%	94.66%	
NSW Health	78.61%	78.66%	80.39%	79.57%	80.02%	80.40%	80.15%	80.05%	79.55%	79.22%	79.37%	78.70%	78.57%	79.37%	78.70%	
<u>Call-Outs District</u> <u>Health Services</u>																
Ivanhoe					10	4	10	10	4	6	10	13	8	10	13	
Menindee					20	16	21	19	23	16	24	21	22	24	21	
Tibooburra					7	1	5	8	5	1	9	7	3	9	7	
White Cliffs					4	6	6	5	6	3	6	6	10	6	6	
Wilcannia					24	12	20	20	27	20	24	22	18	24	22	

*Note: Includes inpatient only discharges

Noni Inglis noted the activity provided in the table showed that over the past few years' operations had not altered greatly and it was the premium labour costs that were driving costs up.

The Chair questioned why the Far West Local Health District costs were so high. Noni Inglis advised it was mainly due to remote location costs such as accommodation, IPTASS, and where minimal staffing was required, costs were higher.

The Board and Committee members discussed the need for FTE to stay around 700 or under which would assist in meeting budget requirements.

12.1.3 Financial Reports

Noted

Debtor Write Offs

Invoices for write off were submitted for review:

- Trade Debtors - \$14,410.29
- Patient Debtors - \$ 333.40

Noted

Resolution: **The Finance Reports be received and noted.**
Moved John Harris, seconded Stephen O'Halloran, Carried

12.1.4 MoH Narrative – September 2019

Noted

Item 12.2 Workforce Development Report

Item 12.2.1 Workforce Development Committee Chair Report

Noted

Noni Inglis advised part of conciliation process in relation to the BIC agreement was to back paying the laundry allowance which was in the process of.

Item 12.2.2 Headcount and FTE September 2019

Noted

Resolution: **The Workforce Development Report is received and noted.**
Moved John Harris, seconded Lilon Bandler. Carried

Item 12.3 Risk Report

Item 12.3.1 Risk Management Unit - Work Health and Safety Report

Noted

The Chief Executive advised there was one workers compensation claim closed during September with sixteen claims remaining open over the current fund years as at 30 September 2019, this includes one new claim received in September 2019.

Resolution: **The Risk Dashboard Reports be received and noted.**
Moved Stephen O'Halloran, seconded Sally Pearce. Carried

Item 12.4 Health Performance Report August 2019

Noted.

Resolution: **The Health Performance Report August 2019 is received and noted.**
Moved Lilon Bandler, seconded John Harris. Carried

Item 13. Committee Reports

Nil

Item 14. Business on Notice

Item 14.1 Aboriginal Health Committee Terms of Reference

Endorsed

Item 15. Items for Discussion

Nil

Item 16. Calendar of Events

Noted

Item 17. Correspondence

17.1 Two Rivers Health Council Resignation Letter

Noted.

Item 18. Other Business

Item 18.1 Meeting Dates 2020

Noted and accepted.

Item 18.2 Executive Presentation Listing 2020

Noted and accepted

Item 18.3 Audit and Risk Committee Membership

Resolved that Mariette Curcuruto-Dunlevy be removed as a member of the Audit and Risk Committee.

Item 19. Annual Public Meeting

Friday 13 December 2019

Item 20. Next Meeting – closed 1.02pm

Monday 25 November 2019

Certified as a correct record.

Andrew Refshauge

Name

Signature

Date


