
Minutes

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

Date: 31 May 2021

Time: 10.15am CST (10.45am EST)

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

Present:

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

Videoconference:

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

In Attendance:

Dr Timothy Smart	Director Medical Services
Mr Muku Ganesh	Director Performance and Strategy
Ms Fiona Lawrance	Director People and Culture
Mr Sean Lomas	Director Collaborative Commissioning FWLHD and WNSWLHD
Ms Hannah Everuss	Board, Committees and Policy Clerk (Minutes)

Meeting Opened 10.23 AM CST/ 10.43AM 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

Dr Olumuyiwa Komolafe Staff Specialist

Item 3. Disclosure of Interest

Nil to add.

Item 4. Order of Business/Urgent Business

Nil.

Item 5. Minutes of Ordinary Board Meeting 26 April 2021

Resolution: **The Minutes of the Ordinary Board meeting held on 26 April 2021 be received as a true and correct record.**
 Moved John Harris, seconded Paul Kemp, 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 20-38 Audit and Risk Committee Membership

Included in TAB 1.

The Chair advised he spoke with Murray Stone regarding the membership of the ARC. The appointed FWLHD Board Members that sit on the Audit and Risk Committee are full members with voting rights until policy changes are implemented. There are a number of plans afoot however there will be consultation when this is occurring. The Chair of the Board has advised that the change to the membership as suggested by the attached brief is inappropriate.

6.3 21 – 26 MHD&A Congratulations Letter re ‘Yes Survey’ result

Included in TAB 2.

A letter of congratulations was forwarded to the MHD&A team regarding the result of top ranking LHD for the second consecutive year in the national ‘Your Experience of Service’ consumer survey.

6.4 20-10 Hospital In the Home

The Chief Executive advised that there are currently changes being proposed to the Hospital in the Home model of care as well as the reporting structure. The CE hoped he would be able to report back on these at the August 2021.

Item 7. Reflections on our Care

Item 7.1 Patient Story

Noted.

Item 7.2 Staff Story

Noted.

Sally Pearce joined the meeting at 10.41AM CST

Item 8. Chief Executive Report

Item 8.1 KPI Dashboard Report

Noted.

Item 8.2 Chief Executive Report

The Chief Executive went through the report noting key points:

- The Chief Executive advised that the FWLHD Coronavirus response continues. The FWLHD has recently been notified that FWLHD will be a Pfizer vaccination hub. The District is awaiting the delivery of a vaccine storage fridge before the Pfizer vaccination program can commence in the District. Although vaccination numbers are low within the FWLHD in comparison to the State, per capita FWLHD is the highest vaccinator. The Health Minister has requested to increase availability of the vaccination clinics to the weekend. The FWLHD is looking into this however it may not be a viable option considering the numbers. The Board did express their concern regarding access to week day only clinics and the demographic that reside in FWLHD who may only visit townships on weekends. The CE advised that we would be taking this into consideration when making the decision regarding vaccination clinic opening times.

Overdue Surgery

- The DMS is working on increasing urology services as we currently have a sole provider who wasn't able to visit Broken Hill recently. Anesthetics is a pressure area for the FWLHD as we have one staff specialist. We do have one VMO anesthetist who does visit and we continue to advertise for further support in this area.
- An additional two Cataract Theatre lists are planned for the 2nd and 3rd June which should result in no overdue Cataracts. Additional theatre date for Plastic Ophthalmology has been accepted for 14 September 2021. Additional gastro lists 26 and 28 May with further 5 additional lists in June with all 30 days scopes attended. Moving onto 90 days. Further lists have been planned for the second half of the calendar year.
- The overdue surgeries should be addressed within the first quarter of the new financial year. The CE and DMS advised that orthopedic surgery will be recommencing rotations from Sydney and Adelaide. Adding an additional operation to each list will make a significant impact on the waitlists.

Clinical Operations

- The CE advised that there is currently a lot of work taking place in the Broken Hill Hospital Emergency Department as an ongoing project. The Director of Medical Services and Director of Clinical Operations and the whole ED team are working together to realign practice to achieving the clinical targets. There are currently some changes occurring in regard to Fastrack. With the current provider's services concluding on 30 June 2021, the FWLHD will take back operation of the Fastrack Clinic with the five new local general practitioners working in as part of our overall Emergency Department staff. This will provide support for our current staff and provide continuity for the community.
- Work continues on a comprehensive body of work in the Outpatients Department aimed at improving governance, business process, waiting list timeliness and access

to services. A project plan is now in place to address the core issues in the OPD and a formal Leadership Team has been established under the Chair ship of the Director of Clinical Operations to address these key risks. Immediate areas of focus include long wait overdue scopes which are being targeted with additional Gastroenterology resources in June and July.

Other Business

- Dr Theresa Anderson CE of Sydney LHD and the FWLHD CE have continued partnership discussions around support for the eICU in the Broken Hill Hospital and a Registrar program for anaesthetics and in the Emergency Department. A great deal of support is being received from Sydney for this to occur. This will offer staff exchange and development opportunities for both LHDs. An Executive working group will be developed with the CE's co-chairing. A MOU will also be developed and is believed to be the first of its kind in regard to LHDs partnering with the FWLHD. This will provide a clarity of understanding for what the relationship is and what it is we are agreeing on to work on and provide services for. The Board Chair advised this could be something the Ministry support rather than just being driven by the two CE's in response to the rural health review.
- The Federal enquiry into rural health will be held in Broken Hill on 3 November 2021. The FWLHD are preparing submissions, being the last location on the schedule. The current inquest with the FWLHD will continue in August 2021. We have been notified of another inquest later in the year commencing.
- The accreditation process will be commencing for the FWLHD on Monday 7 June 2021 and will continue for the remainder of the week. The assessors will be meeting with the Board Members for a 45 minute timeframe. The local Board Members have been requested to be present for one of the sessions, if any Board Members wish to attend via PEXIP they are welcome.
- Applied to Commonwealth to assist FWLHD to create an electronic platform for partner organisations to share information. An in principal agreement has been received from the Commonwealth to provide five million dollars of funding to realise this goal. This will give the LHD the opportunity to do this comprehensively for once and for all. WNSLHD and Murrumbidgee will be involved in this project as well. Future providers need to be able to come on board and use the platform.
- The Director of Research role is being finalised. The CE would like to extend an invitation to Professor David Lyle to attend the June Board meeting to present plan to increase the research program in the FWLHD. This will hopefully increase the attraction and retention of clinical staff in the region.

Action: Invite David Lyle to June Board meeting to present on draft plan to increase the research program within the FWLHD.

- The quarterly performance review meeting was held this month and the FWLHD has retained its zero rating.
- The FWLHD is currently recruiting for a permanent Director of Medical Services, Dr Timothy Smart Interim Director is involved with this recruitment. The response has been positive with six applicants without having to engage head hunters.
- The CE advised feedback has been sort from the stakeholders consulted in the drafting of the Aboriginal Health Framework. Feedback has been received from

stakeholders, the draft deliverables have been further revised by the CE and Director of Planning; Aboriginal Health and Community Engagement. Once the draft is ready it will be tabled for the Board to review. The CE advised that the Aboriginal Health Framework should be finalised by the end of June 2021. The CE advised this is an important document and the first of its kind within the LHD. It has taken a lot of time to establish however the LHD wishes to get it right and set the correct tone in doing so.

Resolution: **The Chief Executive Report be received and noted.**
 Moved John Harris, seconded Wincen Cuy. Carried.

Mariette Curcuruto joined the meeting at 11.12AM CST/11.42AM 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.

Discussion was had regarding the appointment of the Patient Experience Officer in the Broken Hill Hospital Emergency Department. Initially this position was only temporarily funded. The Ministry have agreed to extend the program for this three months with hope to extend longer. This helps to distribute the workload amongst the team and not just being the responsibility of Aboriginal Liaison Officer's. It is everybody's business, a broader team conversation is to be had.

Action: The Board requested that the DAMA and DNW reports be provided as rates and comparison rates rather than actual numbers. Unit to discuss with Senior Manager Health Information and Performance to decrease information provided, to report on rates and comparative data and to include target rates where appropriate.

Morning Tea break 11.20AMCST/ 11.50AM EST/meeting recommenced at 11.35AM CST

Item 9.2 Workforce

Item 9.2.1 Workforce participation rates

Noted. The Committee discussed the workforce participation rates. The separation and commencement of aboriginal employees analysis was provided at the bottom of the report with commentary. The Director of People and Culture advised that the graphed information only included permanent positions. The commentary detailed casual, part time and contractual employees.

Action: Casual and contract employees be included in the graph and table supplied with Item 9.2.1 Workforce participation rates

The Board requested aboriginal employment rate data be provided out of interest regarding Wilcannia and Balranald.

Action: Director of People and Culture to provide employment data to Board Members regarding Aboriginal employees in Wilcannia and Balranald out of session.

Item 9.2.2 Progress on the Reconciliation Action Plan (RAP)

Nil - quarterly report.

Item 9.2.3 Pillar Three Presentation, Fiona Lawrance, Director People and Culture

The Director of People and Culture discussed the provisions of culturally respectful and non-discriminatory health services and practices that the People and Culture Unit are involved in:

- Induction
- Ways of Working – ‘Yamirri Nharatji’ – This way, this direction together
- Respecting the Difference mandatory training
- Dedicated Aboriginal Network meetings
- Signage acknowledging the each service is situated on
- Paintings and murals with language displayed
- The development of an inclusivity shirt for the LHD
- Reconciliation Action Plan
- Dedicated Aboriginal recruitment supports
- Growing aboriginal employment in the Far West through the Aboriginal Workforce Strategy, working toward 13% of the total workforce across the FWLHD.

The Director of People and Culture discussed the importance of attracting, engaging, managing talent, supporting connection to culture, providing a culturally safe space and getting to know the Aboriginal Workforce and planning for future employment opportunities.

Item 10. Presentation

Item 10.1 Sean Lomas – Director of Collaborative Commissioning WNSWLHD & FWLHD.

Sean Lomas Director of Collaborative Commissioning WNSWLHD and FWLHD, presented on diabetes management in the West and Far West of NSW and provided information regarding the Collaborative Commissioning approach to providing care across the whole system Healthcare continuum as part of the NSW Health move to a value based Health system.

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 19 April 2021

Noted.

Item 11.1.3 Finance Report April 2021

Major items of the financial report are:

Overview

	<u>20/21</u> <u>YTD Actuals</u>	<u>Variance to Budget</u>	<u>20/21</u> <u>FY F'cast</u>	<u>Variance to budget</u>
Expenses				
Employee Related	65.666M	1.280M F		
VMO Payments	6.824M	(0.151M) U		
Goods & Services	23.700M	(0.348M) U		
Grants	2.425M	0.000M		
Repairs, Maintenance & Renewals	2.658M	(0.572M) U		
Depreciation and Amortisation	6.087M	0.000M		
Borrowing Costs	0.017M	(0.015M) U		
Other Expenses	0.064M	(0.037M) U		
Total Expenses	107.442M	0.157M F	132.694M	0.355M F
Revenue				
Own Source Revenue	10.985M	(1.261M) U		
Government Contributions	91.016M	0.000M		
Doubtful debts	(0.075)M	(0.075M) U		
Total Revenue	101.993M	(1.336M) U	125.443M	(1.679M) U
Net Cost of Service : Surplus/(Deficit)	(5.449M)	(1.178M) U	(7.251)M	(1.324M) U
Crown Acceptance	1.707M	0.000M	2.595M	0.000M
Asset Transfers - Internal	<u>0.000M</u>	<u>(0.141M)</u> U	(0.215)M	(0.385M) U
Total Result: Surplus/(Deficit)	(3.809M)	(1.320M) U	(4.871M)	(1.708M) U
Management forecast adjustments				
- COVID-19 unfunded – expected to be funded by 30 June 20	<u>0.142M</u>	<u>(0.142M)</u>	0.571M	(0.148M) U
Management Forecast Result Surplus/(Deficit)	(3.667M)	(1.471M) U	(4.300M)	(1.570M) U

<u>FTE</u>	<u>FY22</u>	<u>Variance to Budget</u>
	706.03*	53.29 F

*Excludes 11 HealthX agency staff.

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

- April 2021
 - a. The **expenditure** result for the month of **April** is also surplus, being the fourth consecutive surplus.
 - b. The **revenue** continues to be below target, however, consistent with the projection.
 - c. The net result is an underperformance to target by \$0.108M for the month.
- Year-to-Date April 2021
 - a. Year-to-date Expenditure is favourable by \$0.069M, including COVID-19 of \$0.024M. However, the April expenditure also includes IT replacement and refurbishment costs of \$0.430M to our own residential properties.
 - b. The favourable employee related expenditure position (due to the vacant positions) has fully offset by the unfavourable G&S expenditure. The favourable year to date expenditure position is mainly due to:
 - rolling vacancies (around 46 FTEs)
 - travel cost savings of \$0.483M
 - prostheses savings of \$0.3M due to reduced activity
 - c. Again, the Own Source Revenue continues to be a challenge and for the year-to-date the Own Source Revenue is unfavourable by \$1.329M, bring the net year-to-date result to an unfavourable position of \$1.669M
- Full Year Forecast
 - a. Our full year forecast for expenditure is a favourable position of \$0.355M. However, this also include expected COVID-19 recoup of \$0.139M. Meaning that the underlying position is favourable by \$0.494M.
 - b. As a result, the full year net result will be an unfavourable position of \$1.185M excluding COVID-19 related expenditure.

Activity

- The District is on track to meet the purchased ABF activities. For the nine months to March, the District have produced 8,147 NWAUs against a target of 8,015.
- 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 eight months to March is ahead of target by 132 NWAU.
- At the current rate the District is expected to exceed its target by 0.5% for the full year.

Muku Ganesh left meeting at 12.43PM CST/ 1.03PM 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 Wincen Cuy, Seconded Paul Kemp. Carried

Item 11.2 Quality and Safety Committee

Item 11.2.1 Quality and Safety Committee Chair Report March & April

Noted.

Item 11.2.2 Patient Safety and Clinical Quality Report

It was noted that the things that were going well were:

- Hand Hygiene compliance.
- Low numbers of incidents causing harm – zero harm score 1 and two harm score 2 incidents during the month.
- Medication incidents remaining below KPI for the last six months.
- Twenty-eight-day readmission red flags within KPI for the last seven months.

It was also noted that the things not going well were:

- Significant reduction in the timeliness of complaint's resolution.
- Ims+ completion has reduced.
- The completion of recommendations of RCAs and Clinical Reviews are below target levels, although they are improving.

As well, the analyses done have been accepted and the actions initiated are supported.

Item 11.2.3 Health Care Quality Committee Minutes 29 March 2021

Noted.

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

It was noted that the claim frequency remains low but the workers compensation payments have increased by six percent this month.

As well, it was noted that all claims are being proactively managed.

Resolution: **The Risk Reports be received and noted.**

Moved Sally Pearce, Seconded Lilon Bandler. Carried

Item 12. Reports for Noting

Item 12.1 Health Performance Report March 2021

Noted.

Resolution: **The Health Performance Reports for March 2021 were received and noted.**
 Moved Lilon Bandler, Seconded Sally Pearce. Carried

Item 13. Reports for Endorsement

Nil.

Item 14. Business on Notice

Nil.

Item 15. Items for Discussion

15.1 Board Charter Review

The Board requested that Aboriginal Health and Health Engagement be included in the standing agenda items, the conflict of interest paragraph be edited to reflect disclosures of interest and Board Sub Committees to be updated to reflect the dissolution of the Workforce Development Committee, now reported in the Finance and Performance Board Sub Committee meeting and the Aboriginal Health Committee reported in the FWLHD Operational Executive and FWLHD Board meeting.

Resolution: **These changes to be added to the Board Charter.**
 Moved Mariette Curcuruto, Seconded Paul Kemp. Carried

15.2 Board Protocols Review

Nil changes required.

Resolution: **Board Protocols to be received and accepted to be reviewed again in a twelve months time.**
 Moved Mariette Curcuruto, Seconded Paul Kemp. Carried.

Item 16. Calendar of Events

Noted. The Calendar has been confirmed to be correct.

The CE reported that in September the Clinical Excellence Commission will provide an in-service around Quality and Safety for the FWLHD Board Members.

Action: Clinical Excellence Commission in-service be added to the Calendar of Events.

Item 17. Correspondence

Nil.

Item 18. Other Business

Nil.

Item 19. Closed Meeting

2.45PM CST/ 3.15PM EST

Item 20. Next Meeting

Monday 28 June 2021

Certified as a correct record.

Andrew Refshauge

Name

A handwritten signature in black ink, appearing to read "AR", is written over two horizontal lines. The first line is labeled "Name" and the second line is labeled "Signature".

Date