

## **Western NSW Local Health District**

Western NSW LHD Board Meeting June 2020
Virtual Meeting - Poplars Meeting Room, Orange Health Service or Executive Conference
Room, Hawthorn St Dubbo

Wednesday 3 Jun 2020, 10:00 — 15:00 AEST

#### **ACKNOWLEDGEMENT OF COUNTRY**

The meeting commenced at 10.05am with the Chair providing an Acknowledgement of Country.

Dr Kealy-Bateman was welcomed as the District Medical Executive Staff Council representative.

## **Attendance of Members**

Scott Griffiths (Chair), Dr Joseph Canalese, Darren Ah See, Fiona Bennett, Jason Cooke, Dr Colin McClintock, Paul Mann, Amanda O'Brien, Joan Treweeke.

## In Attendance

Scott McLachlan, Chief Executive; Mark Spittal, Executive Director Operation; Josh Carey, Executive Director Planning, Performance and Funding; Adrian Fahy, Executive Director Quality, Clinical Safety and Nursing;

Dr Warren Kealy-Bateman, District Medical Staff Executive Council; Lauren Nott, Secretariat.

## 1 Apologies John Walkom

## 2 Conflicts of Interest

Nil to add

## 3 Draft minutes of Board meeting held 6 May 2020

Minutes of the meetings held 6 May 2020 were endorsed by the Board.

#### 4 Action Register from Board meeting held 6 May 2020

Progress on action items was discussed.

## 5 Chair Report

The Chair advised a number of towns in the LHD are looking at health precincts plans:

- Orange Health Precinct plan is out for consultation
- Dubbo Health Precinct plan has been out for consultation and feedback re priorities has been received.
- Bathurst Health Precinct project has commenced work with a consultation group set up and workshops held with other agencies. A fruitful meeting was held with key stakeholders on 2 June 2020. Further meetings/consultation will be held with the consultants to develop a draft plan.

Bathurst clinical services plan is out for consultation and master planning is progressing. It is anticipated this will be complete by the end of year.

## 6 Chief Executive Report

In addition to the written report which was noted by the Board, the CE advised the LHD performance overall is good with activity returning to normal winter levels.

## 6.1 COVID-19 Update

The CE advised:

- The LHD is preparing for a second COVID-19 wave across all levels of facilities including aged care. It is pleasing to see sites have shown strong preparedness and planning for COVID-19 including plans to ensure there is no cross over infection within facilities, staff are trained, resources are available etc.
- Testing numbers continue to grow.
- The majority of services have opened to some degree with some services maintaining virtual models.
- Local industries and businesses are opening up and are being supported by the PHU to ensure safe resumption of services.
- The COVID-19 stocktake process being undertaken by the LHD was outlined. The LHD has seen proactive lessons learnt from the simulation exercise.

There was a discussion re concern at a reported high level of false negatives. The LHD has been looking at rates and results and is not seeing a high error rate in NSW Health. Data has revealed if tests are taken correctly the false negative rates are very low. As technology stabilizes and more pathology laboratories come on board testing is improving.

Mr Josh Carey, Executive Director Planning, Performance and Funding joined the meeting via video

Mr Carey advised the forward years' financial process is evolving as COVID-19 progresses. The state budget is now expected mid-November. An interim service agreement is expected in the next few weeks. While a growth increase will still be factored in, it is anticipated there will be reduced growth forecasts into future.

The PPE situation is improving. The EOC continues to run twice per week and is monitoring PPE. It was noted some masks have been received within the state with no testing/approval etc. These have been taken out of circulation as they are not TGA approved. A robust monitoring and governance process is in place to ensure the right PPE is available when needed. There is a link available on the CEC site with information re endorsed masks and equipment which can be accessed to check any PPE received outside of the government process. The LHD is happy to work with outside organisations to check and ensure PPE is approved.

#### Facility Development

- Mudgee Redevelopment formally opened last Thursday (28/05/20).
- Dubbo Redevelopment staff and patients have moved into new areas successfully. Consideration is being given to move into ICU / CCU space when a few issues are resolved.
- Lightning Ridge HealthOne is progressing well.

## 6.2 WNSWLHD Performance Scorecard

The scorecard was noted by the Board. A discussion was held:

- Electronic discharge summaries it was noted different results were reported when Internal Audit investigated this area. Mr Spittal advised the method used by the Internal Audit team was different to the HIU report. Reporting through HIU is the more standard method and includes ED reporting. The LHD is to continue to focus on electronic discharge summaries.
- Preventable hospitalisations the LHD is focusing in this area in a number of ways eg Dubbo using a mini-hotel and Bathurst using electronic devises around

- respiratory care. Some interventions have been brought forward as a result of COVID-19 and these are being rolled out.
- Discharge against medical advice There is a project with CEC and NSW Centre for Aboriginal Health which shows the Aboriginal rate is higher across all services. This is being investigated.
- Aboriginal People that did not wait it was noted there was a marked improvement in this area.
- The CE cautioned that there will be shifts in March and April data due to changes in service delivery due to the COVID-19 response.
- It is anticipated elective surgery will be reinstated by Christmas. A report in more detail will be provided next month re the specified volumes of surgery to be completed each month moving forward.

## 7 Planning, Performance and Funding

## 7.1 Financial Performance Report

Mr Carey spoke to the report which was noted by the Board and highlighted:

- A Commonwealth supplement was received last week. The LHD, in consultation with the Ministry, will look at the best way to maximize the benefit of this supplement.
- While there may be some scaling back of telehealth item numbers at the end of September, there are signals some Medicare items numbers will continue.
   Dr Kealy-Bateman noted the College of Psychiatrists are working to ensure telehealth is an accepted method of care for the future. The distinction between video and telephone consultations was outlined.

## 7.2 Finance & Performance Committee 26 May 2020 draft minutes

The draft minutes of the Finance and Performance Committee were noted by the Board.

## 7.3 Investment Management Framework

Mr Carey spoke to the briefing document and a brief discussion was held.

#### Recommendation

The Board approved the updated Investment Management Framework All members were in favour

## 7.4 Updated Terms of Reference and Annual Timetable

The updated terms of reference and annual timetable for the Finance and Performance Committee were noted by the Board.

## 7.5 Finance & Performance Committee Chair Comments

The Chair highlighted the sustainability plan which will become more relevant in coming years. A presentation on 'own source revenue' was given at the Finance and Performance meeting.

Mr Carey left the meeting.

## 8 Quality, Clinical Safety and Nursing

## 8.1 Patient Story - Orange Stroke Rehabilitation

Mr Fahy spoke to the patient story.

## 8.2 Executive Director Quality, Clinical Safety and Nursing Report

Mr Fahy spoke to the report which was noted by the Board and highlighted:

- There were good results overall with a low number of SAC1 and SAC 2 incidents.
- The recent media stories in the Sydney Morning Herald were discussed at the HCQC meeting. The Minister and CE requested an urgent review of the stories.
   Ms Jo Lemmich, Dr Mel Berry and Dr Claire Skinner (CEC nomination) have commenced the review and have been on site in Cobar and Dubbo.
- The roll out of the deteriorating patient policy was discussed further. The change in policy will allow a focus on known issues and target the work going forward.
- The high number of 'days since last fall' were noted at Dubbo and MHDA.
- IMS+ commenced within the LHD.
- Patient satisfaction results were outlined. A report will come next month re Aboriginal satisfaction results.
- Virtual Pharmacy is progressing well. Recruitment has been undertaken in line with grant funding.

# **8.3** Health Care Quality Committee (HCQC) Meeting 23 May 2020 draft minutes The draft minutes from the HCQC meeting were noted by the Board.

## 8.4 HCQC Chair Comments

Director O'Brien highlighted a number of items including:

- Sydney Morning Herald articles
- Coronial matters change in reporting process. The Board felt the existing structure could be improved ie the responsibility for the reports sits with Risk Management Unit and Audit and Risk Committee and the full coronial report is to go to Quality and Clinical Safety for governance, focus, reporting etc.
- The Community Consumer representative position has been readvertised. The District Clinical Council Community representative term has also expired. The CE is to talk to the Executive Director Communication and Engagement to progress the replacement. It was felt this could be in line with the HCQC representative.
- Reflection at end of meeting the meetings tends to focus on safety rather than quality. This was taken to an out of session discussion to report back next meeting.
- The CEC works with the LHD and has linked in to HCQC meetings in the past.

## 9 Clinical Operations

#### 9.1 Executive Director Clinical Operations Report

Mr Spittal spoke to the report which was noted by the Board and highlighted that a number of interventions put in place for COVID-19 have been wound back. This is being done at the site level noting the need to have plans in place should COVID-19 resurface. This includes Parkes for colonoscopies (assisting Dubbo) and Forbes for eye lists (assisting Orange).

## 9.2 Lachlan Maternity Project Update

Mr Spittal spoke to the brief which was noted by the Board. A discussion was held. Progress is being made and work continues behind the scenes re increasing the number of GP VMOs in the area with expertise in the new model.

It was noted there needs to be an appendix or explanation of service delineation in briefs to the Board to ensure all have a full understanding of the issues presented. This is also a critical issue for community members. Commonsense language is essential. The Communications team is working to help clarify communications moving forward.

#### Recommendation -

The Board noted the progress towards establishing a level 2 birthing service at Parkes campus and level 3 birthing service at Forbes campus and that medical support for the MPG model at Parkes is an issue that is still being worked through.

All members were in agreeance.

#### 9.3 Rural and Remote GP VMO Services Tender

Dr Shannon Nott, Rural DMS joined the meeting

Dr Nott spoke to the brief and presentation which were noted by the Board. A robust discussion was held.

Director Treweeke declared a potential conflict of interest re RFDS and service provision in the north west

- The existing contract was outlined.
- While Option 2 is the preferred way forward; Option 3 may end up as the back stop. There is a strong need to test the market to help find a solution moving forward in a relatively short time frame.
- The Chair noted discussions that have been held around a 'cooperative' model.
- It is anticipated there will be difficulties moving forward along with other competing complex issues facing the LHD.
- Change management will be crucial as will be the management of community expectations. The Board noted the potential risks moving forward.

The next step will be for Operations to put together a team to progress the matter.

The Board thanked Dr Nott and acknowledged the work undertaken to date.

Dr Shannon Nott left the meeting. Director Ah See left the meeting.

## 10 Directorate Update

## 10.1 Medical Services

Dr Clayton Spencer, Executive Director Medical Services joined the meeting via video Dr Spencer spoke to the Directorate report which was noted by the Board. A brief discussion was held.

Director Treweeke noted vCare has a service level agreement with RFDS to provide air services for the LHD.

#### 10.2 Clinical Streams

Dr Spencer spoke to the Clinical Streams report which was noted by the Board.

The Chair thanked Dr Spencer.

Dr Spencer left the meeting

## 11 Audit and Risk

## 11.1 Audit and Risk meeting held 15 May 2020 draft minutes

The draft minutes of the Audit and Risk Committee were noted by the Board.

## 11.2 Audit and Risk Comments

Director Bennett highlighted the:

- Conversation re membership of the ARC and the requirement for prequalification on the NSW government list of prequalified audit and risk committee members to meet attestation requirements. It was noted that only prequalified independent appointees to the ARC will be committee members, with Board members being observers.
- It was suggested that Board members rotate as observers on the ARC each two years, with consideration given to staggering the rotation.
- Breadth of the work of the Audit Office of NSW.

The Chair noted the risk appetite is an LHD document which the Board is responsible for. The wording of this is to be amended in the draft ARC minutes.

## 12 Medical and Dental Appointments Committee

## 12.1 MADAAC meeting held 20 May 2020 draft minutes

The draft minutes and recommendations from the MADAAC meeting were noted by the Board.

## 12.2 MADAAC Chair Comments

Director Treweeke highlighted the appointment of Dr Parkes as Clinical Director vCare (20 hours per week) and of Dr Alison Beaumont, GP VMO Cowra.

## 13 District Medical Staff Executive Council

#### 13.1 DMSEC Meeting held 19 May 2020 draft minutes

The draft minutes of the DMSEC meeting were noted by the Board.

## 13.2 DMSEC Representative Comments

Dr Kealy-Bateman advised the meeting focused on:

- COVID-19 scaling down and now scaling up services and models of care
- Updating of the DMSEC terms of reference
- The value of the DMSEC linking with the Board.

#### 14 General Business and Business Without Notice

#### 14.1 Media Issues - Cobar

The CE spoke to the briefing paper which was noted by the Board. A discussion was held.

- The review process for all the cases identified has commenced.
- The LHD anticipates that under the existing political environment there will be an emphasis on rural health in coming months with the potential for further media issues.
- Lessons learnt were discussed as was the media response. In this case, as there
  was no patient information provided it was difficult for the LHD to respond directly
  to questions.

## 14.2 Redevelopments

Mudgee – a walkthrough video was shown.

Dubbo – links to videos showing Dubbo Redevelopment ED, Imaging and dialysis to be distributed.

Lightning Ridge – Photos to be distributed.

#### Action:

L Nott to send out links to redevelopment links and photos for Mudgee, Dubbo and Lightning Ridge.

Action by: L Nott Action due: ASAP

## 15 Reflection of Meeting

A brief discussion was held which included areas of interest for future meetings. This includes:

- Progress on People Matters Survey from last year
- Aged care living in aged care facilities (ACI) feedback
- Committee performance reviews

A discussion was held regarding the venue of the July and August meetings.

There being no further business the meeting was closed at 2.57 pm

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Signed:	Mugh	Date: _	1 July 2020	