Southern NSW Local Heath District



Minutes for disclosure

Southern NSW Local Health District Board meeting

SDOC 23/9799

Meeting # 8/2023

Meeting Date: Tuesday 22 August 2023

Meeting Time: 1.45pm - 3.45pm

Meeting Location: Virtual / Nummerak Room, Peppertree Lodge, Queanbeyan

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Attendance and declarations

Present

Beth Hoskins	Chair	Margaret Bennett	Chief Executive (CE)
Terry Clout, PSM	Deputy Chair	Fiona Renshaw	Executive Director Operations (EDO)
Leanne Barnes, OAM PSM	Board Member	Damien Eggleton	Director Mental Health, Alcohol and Other Drugs / Director People and Culture (DMHAOD/DDPC)
Ken Crofts	Board Member	Sarah Wallace	Director Finance and Performance (DFP)
Dr Megan Keaney	Board Member	Alison Broadbent	Director Nursing, Midwifery and Clinical Governance (DNMCG)
Geoff Kettle	Board Member	Dr Elizabeth Mullins	Executive Director Medical Services (EDMS)
Margaret Lyons	Board Member	Lou Fox	Director Integrated Care and Allied Health (DDICAH)
Dr Duncan MacKinnon	Board Member	Sarah Galton	General Manager – Corporate Services and Projects (GM- CSP)
		Kavi Gunaseelan	Director Operational Performance

In Attendance [Teleconference / Videoconference]

Narelle Davis Board Member

Jennie Gordon Board Member

Nicola Yates Director Project Management and Commissioning (DPMC)

Vanessa Barratt Manager Media and Communication (MMC)

Jen Spain Director Governance Risk and Audit (DGRA)

Brad Scotcher General Manager, Coastal Network (GM-C)

Brian Bonham General Manager, Inland Network

Apologies

Dr Vennassa Wong Board Member

Dr Suyin Tan Co-Chair Medical Staff Executive Council (CMSC))

Agenda items

Item 1: Welcome

Item 1.1: Welcome and Acknowledgment of Country

The meeting was declared open at 1.47pm. The Chair acknowledged the traditional custodians of the lands encompassed by Southern and paid respects to Elders past, present and emerging.

The Chair welcomed presenters Michaela Tyrell, Janice Dalton and Professor Mick Reid to the meeting.

Item 1.2: Declarations of Interest

All Board members were asked to provide details of any pecuniary interests, Conflicts of Interest or Director Related Transactions to the Secretariat. The register was last updated in April 2023. No new declarations were made.

Item 2: Presentations

2.1 South Coast Radiation Therapy access review and review of Board areas of strategic interest

Review of south coast Radiation Therapy services

Professor Mick Reid provided an overview of the findings of the review into the feasibility of establishing a radiation therapy service within the new Eurobodalla Regional Hospital (ERH).

Significant consultation has occurred with community groups, General Practitioners (GPs), the Medical Staff Council (MSC), the Cancer Institute NSW (CI NSW), Ministry and the Nowra and Canberra services.

CI NSW data for projected cancer cases for the south coast supports up to 1.3 Linear Accelerators (Linac). The review has considered whether people would change their current treatment location, the likely uptake, the consequences for the Canberra and Nowra services, whether the service can be provided safely and sustainability as well as cost implications for ERH.

The review found that people will access a local service. Evidence shows a likely Increase in the rate of Radiation Therapy (RT) treatment if a service is provided locally. Discussion followed about the provision of one Linac, or two bunkers and one Linac as for other areas in NSW to future proof.

Networking arrangements are important to ensure continuity of care. There are significant vacancies in the medical oncology field, with a workforce meeting in Nowra with Canberra service providers planned.

A range of options were considered in the review and while it was included in the review, a separate private service is not a model for recommendation. A further option is a contracted provider such as ICON, or Genesis to provide the service in ERH. The third option considered is a public service, networked with Nowra.

Reversal of flow for NSW residents currently travelling to Canberra was discussed with ACT Health who have indicated no issue as their waiting lists are long. Nowra are managing well, but workforce is a challenge.

Professor Reid noted that the MSC are supportive for a service at ERH but not at the cost of other services.

A Board member asked about Commonwealth RT grants for regional services. ERH has been identified as an area to support. The Commonwealth's \$8M offer is inadequate to fund the capital cost of the service which is estimated to be around \$30M. Recurrent costs are estimated at \$3.5M/annum.

The CE noted the issue of the cost of doing business in Southern, and the concern that the cost of funding an RT service would further add to this. The CE also noted the range of capital risks the District is currently carrying, as well as the imperative for the operational costs of a radiation therapy service to be fully covered, in the event of the service being established.

The review found that the service can be provided in a safe manner, and is a needed service. The population justifies the provision of a single Linac.

A Board member questioned whether the major limiting factor to safe operation would be to staffing of the service, acknowledging the proposed networking with Nowra/Canberra. The review will flag the issue of retention of staff to support the service.

A draft of the Radiation Therapy report will be provided to the Health District when it is provided to Ministry.

Board areas of strategic interest

Professor Reid noted the degree of uncertainty amongst State authorities, and provided an overview of the National landscape.

Opportunities include the Rural Health Service review which is progressing the 44 recommendations of the Parliamentary Inquiry into Rural and Regional Health.

Jennie Gordon and Leanne Barnes left the meeting at 3.15PM.

Professor Reid left the meeting at 3.20pm.

The CE asked Professor Reid to continue to provide updates to the Board over the next 12 months. Board members were invited to provide any specific topics for discussion to the Chair.

2.2 Voluntary Assisted Dying legislation implementation update

Project Lead Michaela Tyrrell provided an update on progress of the implementation of Voluntary Assisted Dying (VAD) legislation in the Health District.

A draft Model of Care is being circulated for review. Proposing an Inland and a Coastal squad to support the entire District. Social work support is being developed for families and carers.

Engagement with medical staff is an area of focus, aligned with and supported by Ministry.

A staff survey has been released to gather information about understanding of VAD.

A Board member asked about engagement with aged care facilities. One has declined to engage at this time. Other facilities have been very supportive with meetings with management occurring and planned.

VAD updates will remain as a standing agenda item for the Board.

2.3 Transitional Aged Care Program redesign

The Transitional Aged Care Program (TACP) provides short term care to support independence of older people on discharge from hospital.

The District has five teams providing outreach across the District.

In 2020, a project team was established in partnership with the University of Tasmania, supported by the Agency for Clinical Innovation. The team have developed processes to improve delivery of TACP across the District.

Redesign involved consumers throughout the whole redesign process. Scope has a whole of District approach and with focus of transferrable learnings. The objective of the redesign was to improve the consumers' ability to participate in life roles and community activities. Á

Issues which led to the redesign included 53% of patients not receiving an initial care plan when discharged. A comprehensive framework and orientation package was developed and has been shared widely.

The District has achieved positive results as well as improved collaboration within teams and an improved relationship with the brokered provider who provides non medical support.

Activity is high, and the program has a positive financial outcome. Quality of care for consumers has been increased significantly.

A Board Amember Asked About involvement of the consumer's GP and Awas advised that the GP is kept informed with a copy of the support plan provided and regular updates. At the end of the program a discharge letter and copy of the care plan are provided to the GP.

A Board member asked about outcome improvement for the consumer. Further information about outcomes will be provided to the Board.

ACTION: Out of session information paper detailing TACP redesign outcomes and issues identified, with the denominator included, will be provided to Board members.

At the conclusion of TACP, if needed, services are provided through existing external supports, or are linked during the TACP program for re-assessment.

Board member asked if financial support for the 59 current places offered is continuing. DDICAH confirmed no end date for TACP.

Demand for the service was discussed, with advice that the service delivers at 110% occupancy, providing 60-62 places per day.

While there is fluctuating demand, around 65 places is appropriate for the District. There is a strict criteria for access to the program around restorative and rehabilitation support.

2.4 Clinical Service Plan

GM-CSP advised that consultation has occurred with internal and external stakeholders. Focus areas include providing care close to home, ensuring sustainability, equitable access, planning for the ageing population, and planning for growth and changing service needs.

A Board member noted the significant comment already provided and asked how inputs are being incorporated. GM-CSP advised that general edits and additional information will be included.

Anything more controversial will come to the Executive and potentially Board. Current projections are based on the current state.

A Board member noted the lack of reference and detail around community based services/non hospital based services. Board members asked Ahat a focus area of "keeping people healthy" Abe adopted.

GM-CSP confirmed that the Plan has not yet been circulated for external consultation.

The Board discussed a more holistic approach and integrating preventative health care plan with the CSP. The Board also discussed primary, secondary and tertiary care. A Board member noted the importance of supporting rural and regional care, and the importance of partnering with primary health care providers.

The Board agreed that DDICAH and GM-CSP should review CSP wording to explicitly reference care for the health of the population. A Board member asked whether it might be useful to articulate at the beginning of the Plan diagrammatically showing pathways and interrelationships.

ACTION: DDICAH and GM-CSP to consider areas of concern raised by the Board in relation to the Draft CSP and consider how these may be referenced in the CSP. Return to the Board for review following consultation.

DDICAH noted the opportunity of having a captive audience of patients when in hospital which provides an opportunity to build in wellbeing, self care and responsibility for wellness with each admission.

The Chair noted that improved community care provides an opportunity to keep ageing populations out of aged care. The Board discussed incorporating the District model for care for geriatric populations into the Plan.

The Chair also noted environmental challenges and the lack of reference in the Plan. GM-CSP noted that this is covered in trends and projections, though there is no specific modelling that increases demand based on environment.

Item 3: Confirmation of Previous Minutes

Item 3.1: Confirmation of Minutes of Meeting on 25 July 2023

The Minutes of the Board meeting held on 25 July 2023 were accepted as a true and accurate record.

Item 3.2: Confirmation of Minutes for Disclosure of Meeting on 25 July 2023

The Minutes for disclosure of the Board meeting held on 25 July 2023 were accepted as a true and accurate record.

The Chair noted a change required in the Minutes for Disclosure, to redact the sentence "The District will await Professor Mick Reid's review, of which the draft report will be provided the August Board meeting. A his review will inform the District's position on his matter".

Item 4: Actions from Previous Meetings

Item 4.1: Action Log

The Board reviewed the outstanding action list.

Item 4.1.1: Action item 24/2023 - Provide CAMHS Review Implementation Plan to August 2023 HCQC meeting

Confirmed as an agenda item on the Health Care Quality Committee agenda 22 August 2023.

Item 4.1.2: Action Item 26/2023 - Provide additional information regarding the potential virtual

referred to.

Agenda item 8.6.

Item 4.1.3: Action Item 27/2023 - Confirm the key factors behind the 9.8% increase in medical imaging across the District for 2023

Agenda item 8.7. Closed.

Item 4.1.4: Action Item 29/2023 - The Draft Clinical Service Plan to be provided for review at the August Board meeting.

Agenda item 2.4. Closed.

Item 33/2023 - Advise whether solar is a planned inclusion for the Cooma Key Worker Accommodation project

Item 5.1: Chief Executive update

The CE noted the ongoing negotiation with Ministry about funding and performance.

Other areas of focus include resolution of the capital works shortfall for ERH and the District's concern that key components of the build may be being shelved with the expectation that funding will be found later. The Operational Level 3 for ERH has been escalated. The District are awaiting a response from Ministry. The matter has also been raised with the Parliamentary Secretary.

Planning for the Batemans Bay Community Health Centre and the potential to reconfigure the Batemans Bay site is progressing. A meeting with Coordinare about the Urgent Care centre has occurred with discussions with a potential partner proposed by Coordinare to occur.

The CE noted that funding flagged for a review of maternity services at Yass will require a further body of work. This will not progress until funding is received which will not occur until after the September budget.

The new District Director People and Culture will commence 3 October 2023. The CE noted her gratitude to Damien Eggleton for acting in the role for an extended period of time.

The Premier and Minister have District visits planned on 28 August and 6-7 September.

A deep dive at Goulburn is progressing, to ensure an intense focus on culture and clarity. Such deep dives will be carried out at sites across the District as needed.

The CE also noted termination services, with a private provider ceasing services in the ACT which may impact the District's services.Á

The Chair asked about the review of Yass. Nothing until funding received, post September. Modelling of population projections to support the Yass CSP. Potential for expansion of the Midwifery-led services through an improved continuity of care service.

Item 5.2: Board Chair update

No update.

Item 6: Patient story

Item 6.1: Patient Story - VRGS experience, Inland Network

A patient story about an experience of care of VRGS was provided at HCQC 22 August 2023.

Item 7: Discussion and endorsement

Item 7.1: Action 20/2023 - Subcommittee Terms of Reference

The Performance Committee and Community Engagement Committee Terms of Reference were endorsed.

The Community Engagement Committee Terms of Reference were endorsed by the Board.

The Health Care Quality Committee TOR were reviewed and endorsed at HCQC and were also endorsed by the Board.

Item 7.2: Board workplan item - Aboriginal health update

Board members endorsed the update provided at HCQC.

Item 7.3: Board workplan item – Information Services unit update

Board members discussed and endorsed the update provided at HCQC.

Item 7.4: Clinical Governance Attestation Statement

Board members discussed and endorsed the attestation statement.

Item 8: Items for information

Item 8.1: Board Correspondence summary

A Board member noted that the District had provided a response to the Ministry in relation to the Parliamentary Inquiry into consultant use and asked that a copy of the response be provided to Board.

ACTION: Provide District response to the Parliamentary Inquiry into Consultant use, to Board.

Item 8.2: 2023 Board schedule of dates

Noted.

Item 8.3: 2023 Board workplan

Noted.

Item 8.4: Ministry Quarterly Board report – January to March 2023

Noted.

Item 8.5: Board workplan item - Board and staff engagement opportunities

Noted.

Item 8.6: Action 26/2023 - Provide additional information regarding the potential virtual cardiology services partnership with SWSLHD and other potential partnership opportunities referred to.

EDMS provided a verbal update detailing meetings held with ACT Health to progress relationships with patients at SERH and Goulburn.

ACTION: EDMS to provide an update on potential virtual service partnerships with the ACT and SWSLHD to HCQC.

Item 8.7: Action 27/2023 – Trends in medical imaging and emergency Department activity - key factors behind the 9.8% increase in medical imaging across the District for 2023

Noted.

Item 8.8: Action 33/2023 - Solar plans for Cooma Key Worker Accommodation project

The Board noted the report. The CE advised that solar panels for the KHWA accommodation project had been raised with the HI, and will continue to be advocated for.

Item 9: Accountability

Item 9.1: Medical and Dental Appointments Advisory Committee

Tabled and noted.

Item 9.2: Health Care Quality Committee

No July meeting

Item 9.3: Audit and Risk Committee

No July meeting

Item 9.4: Performance Committee

Tabled and noted.

Item 9.5: People and Culture Committee

No July meeting

Item 9.6: Community Engagement Committee

No July meeting

Item 9.7: Aboriginal Health Governance Committee

Tabled and noted.

Item 9.8: Finance report

The report was noted and was discussed at the Performance Committee meeting on 22 August 2023

Item 10: Business without notice

Nil

Item 11: Board meeting review

Item 11.2: Summary of key themes

No review took place.

Meeting Close

The meeting closed at 3.50pm.

Board members completed a meeting review in-camera.

Next Meeting

The next meeting will be held on 26 September 2023.