

SDOC: 21/1253

Meeting of the Southern NSW Local Health District Board

No. 2021/2

Date: Thursday, 4 February 2021

Time: 3:00pm - 6.00pm

Mark Harrison, Deputy Chair

Pru Goward, Board Member

Venue: Vibe Hotel, Canberra / Teleconference

Minutes for disclosure

In Attendance

Dr Allan Hawke AC, Board Chair Margaret Bennett, Chief Executive

Dr Ken Crofts, Board Member Julie Mooney, Acting District Director Operations

Narelle Davis, Board Member Tracey Elkins, Acting Director Quality and Safety

Geoffrey Kettle, Board Member Jenny Spain, Manager Governance, Risk and Audit

Russell Fitzpatrick, Board Member Jill Adams, District Director People and Wellbeing

Russell Schneider AM, Board Member Bronny Roy, Director Finance and Performance

Margaret Lyons, Board Member Damien Eggleton, District Director Mental Health Drug and

Alcohol

Lou Fox, District Director Ambulatory Care
Beth Hoskins, Board Member

Liz Mullins, District Director Medical Services

Dr Pavan Bhandari, Board Member

Dr Anthony Stevenson, Chair SNSWLHD Medical Staff

Executive Council

Dr Nathan Oates, SNSWLHD Medical Staff Executive

Council

Vanessa Barratt, Manager Media and Communications

Leanne Ovington, Acting Director Nursing and Midwifery

Secretariat

Karen Clark, Executive Officer

Item 1	Welcome and Apologies
Item 1.1	Welcome

The meeting was declared open at 3.01pm. The Chair acknowledged the traditional custodians of the land and paid respects to Elders past, present and emerging.

The Chair noted that Board Member Mark Harrison would be delayed and welcomed Dr Liz Mullins, EDMS to her first meeting.

The Board resolved to thank Dr David Dumbrell for his stewardship of the EDMS role.

Item 1.2 Conflict of Interest Declarations

No additional changes in material circumstances were noted at the meeting.

Item 2	Confirmation of Previous Minutes
Item 2.1	Confirmation of Minutes of Meeting on 14 January 2021

The Minutes of the Board meeting held on 14 January 2021 were accepted as a true and accurate record of the meeting with the inclusion of Board Member Beth Hoskins as an attendee.

Item 2.2 Confirmation of Minutes of Meeting on 14 January 2021 for Public Disclosure

The Minutes for disclosure of the Board meeting held on 14 January 2021 were accepted as a true and accurate record of the meeting with the inclusion of Board Member Beth Hoskins as an attendee.

Item 3	Action List
Item 3.1	Outstanding Actions

The Board reviewed and discussed the action list.

Action Item 14/2020 – *Team Safety Fundamentals* – *Update for February 2021 Board meeting* was provided at Agenda Item 4.4. To be closed.

Action Item 15/2020 – Quarterly risk presentation advising key risks and actions being taken to address them was provided at Agenda Item 4.6. To be closed.

Action Item 17/2020 - Review of best practice models of care for non-acute mental health rehabilitation – Update to February 2021 Board meeting was provided at Agenda Item 4.5. To be closed.

Action Item 22/2020 – Development of Board Above and Below the Line Behaviours and the ELEVATE nine principles were included at Agenda item 7.1. To be closed.

Action Item 1/2021 - Recruitment of GPs to the far south coast was included as an agenda item for the Joint Board meeting on 4 February 2021. To be closed.

Item 4	Presentations
Item 4.1	Patient Story

A patient story from the Goulburn Hospital maternity unit was presented to the Board, detailing the positive experience had by a patient and her family.

This is an example of a patient story used by the site and elsewhere to make positive changes following feedback from patients.

Suggestions made by the patient included provision of information on aftercare for women delivering their baby via c-section and contact details for physio services. These suggestions were shared with the local maternity team and as a result the team have now created a patient booklet incorporating the range of services available and information for mothers following discharge.

Item 4.2 COVID-19 update

Acting District Director Operations provided an overview of the District's Covid response. The Emergency Operations Centre (EOC) meet twice weekly. The District is remaining agile, particularly following the

recent community transmission issue in Victoria. Over 72,000 tests done to date in SNSWLHD. The District currently has 77 cases, the last 7 have all been hotel quarantine cases.

The District's priority is fit testing and making this part of business as usual. Planning is progressing for the vaccine roll out and installation of QR code technology at sites.

Item 4.3 Restructure Update

A Restructure Implementation Plan and timelines have been developed.

A review of staff establishment is being finalised to provide accurate staff data. The final staff establishment will be uploaded by HealthShare.

Recruitment is progressing with an offer being issued for the GM Tablelands position. Interviewing on 5 February for GM Coastal and an interview date has been date set for the Executive Director Operations. The Director Elevate position has been advertised.

Item 4.4 Team Safety Fundamentals

An update on the Team Safety Fundamentals (TSF) project was provided, following the District's partnership with the CEC. A critical issue is effective teamwork and communication.

Eight core TSFs have been developed by the CEC. These are practical tools available at sites to use at patient bedsides.

The Safety and Quality Account committed to introducing four of the TSFs in 2021. These include:

- Safety huddles, which many of the sites are using already, to help to ensure consistency of care across all sites.
- Morbidity and Mortality Meetings allow departments to review the quality of care provided to patients.
 These meetings are already in place at most facilities. The District Medical Leads will assist embedding learnings from these meetings.
- Intentional Rounding ensures purposeful, hourly visits to patients and their family/carer. This is
 already in place at some sites. Crookwell Hospital is one with intentional rounding embedded. The
 site has passed 650 plus days without a patient fall, showing a benefit of intentional rounding. A Safe
 Care project is planned for 2021 as an extension of the Northern Falls Prevention Project.
- Leadership Rounding The District's Executive meetings are held at sites across the District on a monthly basis. Scripts and processes are being developed.

A Board Member asked about implementation of intentional rounding at mental health inpatient units. DMHDA advised that this will be undertaken at sites but is a separate body of work to the TZI initiative.

Item 4.5 Review of District Drug and Alcohol Services

DMHDA advised that the Review of District Drug and Alcohol provided an opportunity to identify what excellence looks like for mental health services in SNSWLHD. Dr Tony Gill led the Review, which identified areas of effectiveness, areas of improvement and appropriateness of clinical governance in mental health service provision. The Report, included at agenda item 5.1, made 27 recommendations. Highlights include positive engagement of the District with NGOs, the dedication of staff and access to opioid treatment.

Areas of improvement include the opportunity to improve the profile of drug and alcohol services, improved clinical governance and improved access to clinical supervision. The Report recommended an increase in the Clinical Director to 0.8 FTE.

A Board Member asked about identification and treatment of people with issues associated with the drug 'ice'. DMHDA noted that there is improvement needed in that area and a need to improve models of care for withdrawal treatment across the District in consultation with Medical Services and the EDs.

Models of drug and alcohol care for Aboriginal people was also identified as an area of focus, along with progressing virtual care.

The District will now develop a plan with clear actions, outcomes and timeframes. This is being developed by Deb Plant, Director Community MHDA services and will be done by end March 2021.

The Board noted the Report's contents and supported development of the Implementation Plan.

Item 4.6 Quarterly Risk Update

MGRA noted the recruitment of the District's Risk Manager.

The Directorate are developing a focus for the Audit and Risk Committee in terms of compliance requirements and the risk environment. A District Network Return audit has been completed and others underway include an audit of drug management, VMO's and Covid management.

Audits completed include procurement and workforce processes.

Item 5	Leadership
Item 5.1	Chief Executive update

The Chief Executive provided an update to the Board on current issues and the LHDs focus for the coming 90 days.

The CEC's report following their review of SERH has been received. An Action Plan is being developed and will be presented to the March 2021 Board Meeting.

Planning for the New Eurobodalla Hospital continues. Meetings involving MOH, Local Government and Health Infrastructure are progressing development of a working plan for a health precinct/enhanced primary care space in Batemans Bay to ensure a progressive transition to the new hospital at Moruya.

The CE proposed that the Board Quarterly Operational Plan Review should occur at the March 2021 Board meeting. As well as review of the Operational Plan, it was proposed that a workshop focussing on key areas including; an update on strategic planning, virtual care, Aboriginal health, the establishment of the Coastal Network, a redevelopment update, medical leads diagnostic review and a presentation by the medical Leads Chair to detail the key items resulting from the diagnostic and this will inform focus on quality and safety.

The CE noted the need for development of a business case and focus on EDs at Goulburn and Cooma. The challenges around enhancing focus at Moruya and appropriately staffing of the ED and COU are key steps in forward development of the new Eurobodalla hospital.

The Parliamentary Inquiry into health outcomes and access in rural and regional health was discussed. A link to the Inquiry, which has received over 680 submissions, has been provided to the Board.

MOH are managing responses in concert with CE's. The first Inquiry hearing is set for 19 March 2021.

The CE detailed a recent meeting with HI regarding the balance of works to be completed at Goulburn.

Focus now is the next stage. Additional funding is required, along with a detailed business case.

The CE will meet with Vince McTaggart of MOH next week to discuss both Goulburn and Batemans Bay and an update will be provided to the March Board meeting.

The CE noted a positive Medical Staff Executive Council (MSEC) meeting on 3 February 2020. The District is already seeing strengthened focus and engagement at sites.

EDMS advised that a Medical Lead Chair is to be appointed and will be supported by EDMS. Focus now is on the structures for medical leadership at sites. Site-based Medical Staff Councils (MSC) provide an important site perspective. MSC provide advice regarding what works well at sites. The medical leads then ensure specialty advice to ensure that all sites adhere to the same standards, and clinical variation is consistent across the District.

Engagement with GP's, communication and virtual care improvements are areas of important focus for the EDMS.

MSEC have been requested to nominate a clinical representative for the Board following the end of Board membership term for Dr Bhandari and the resignation of Dr Tugwell.

The MOH requirement for consultation with psychiatrists and how this will occur, whether through MSEC or another forum, was also raised at MSEC.

The launch of the Coastal Network occurred on 3 February in Narooma, bringing together over 80 staff from the Eurobodalla and Bega Valley sites.

Item 5.2 Board Chair update

The Chair noted the placeholder for the Board Forum planned for 15 March 2021. No further details have been provided at this time.

The regular meetings between the Secretary and Board Chairs recommences from 10 February 2021.

The Chair noted recent media regarding the merger of ACT Health.

Item 6	Accountability
Item 6.1	Medical and Dental Appointments Advisory Committee Draft Minutes
Noted.	
Item 6.2	Health Care Quality Committee (HCQC) Board Report and Draft Minutes
Noted.	
Item 6.3	Audit and Risk Committee Meeting update

No meeting held in December/January.

Item 6.4	Performance Committee Minutes
Noted.	
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Noted.

Noted.

Item 7	For Endorsement
Item 7.1	Draft SNSWLHD Above and Below the Line Behaviours
The Board reviewed, discussed and accepted the Above and Below the line behaviours tabled.	
Item 7.2	Draft SNSWLHD - Nine Principles
The Board reviewed, discussed and accepted the Nine Principles tabled.	
Item 7.3	Board Paper – January 2021
The Board Chair's Board Paper was reviewed, discussed and accepted	

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Item 8	For Information Only
Item 8.1	Board correspondence summary
The Board noted the summary of correspondence received and sent during December 2020.	
Item 8.2	2021 Board Work Schedule
Noted.	
Item 8.3	2021 Board meeting Schedule
Noted.	

Item 8.4 December 2020 League Table- Selected Performance Indicators by LHD and Network -

Noted.

Item 8.5 Surgical Dashboard - November 2020

Noted.

Item 9 Business Without Notice

The CE advised the Board of a cricket infestation in Goulburn which has impacted on surgery.

The Board asked that learnings relating to the Goulburn development be applied to the Eurobodalla build

obstacles to providing rural and regional health care can be identified. A Board Member asked about comments provided to the Parliamentary Inquiry and whether themes of

the March Board meeting. ACTION: A briefing detailing themes of Parliamentary Inquiry submissions will be provided for

submissions to the parliamentary Inquiry might identify opportunities for strategic direction. The group discussed the strategic focus for the Joint SNSWLHD/Coordinare meeting and how

a strategy to then partner with ANU and UC. The issue of GP succession planning provides an opportunity for the District and Coordinare to develop

The meeting closed at 4.03pm.

Endorsed for publication

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Board Chair Dr Allan Hawke, AC

4 March 2021