

Meeting of the Southern NSW Local Health District Board

No. 2021/5

Date: Thursday, 6 May 2021

Time: 10.00am – 1.00pm

Venue: Lotus Room, Peppertree Lodge, Queanbeyan / Teleconference

Minutes for disclosure

In Attendance

Dr Allan Hawke AC, Board Chair

Mark Harrison, Deputy Chair

Dr Ken Crofts, Board Member

Narelle Davis, Board Member

Russell Fitzpatrick, Board Member

Russell Schneider AM, Board Member

Margaret Lyons, Board Member

Beth Hoskins, Board Member

Pru Goward, Board Member

Dr Pavan Bhandari, Board Member

Geoffrey Kettle, Board Member

Margaret Bennett, Chief Executive

Tim Griffiths, Executive Director Operations

Julie Mooney, Director Nursing and Midwifery

Tracey Elkins, Acting Director Quality and Safety

Bronny Roy, Director Finance and Performance

Damien Eggleton, District Director Mental Health Drug and Alcohol

Lou Fox, District Director Ambulatory Care

Dr Liz Mullins, District Director Medical Services

Leanne Ovington, Acting Director Nursing and Midwifery

Jenny Spain, Manager Governance, Risk and Audit

John Casey, Acting Director People and Wellbeing

Dr Graeme Pickford, Chair of Medical Leads

Dr Nathan Oates, SNSWLHD Medical Staff Executive

Council

Jackie Jackson, Manager Aboriginal Health

Apologies

Dr Anthony Stevenson, Chair SNSWLHD Medical Staff Executive Cou

Jill Adams, District Director People and Wellbeing

Vanessa Barratt, Manager Media and Communications

Dr Daniel Smith, District Co-Director Quality, Safety and Patient Experience

Secretariat

Karen Clark, Executive Officer

Item 1	Welcome and Apologies
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Item 1.1	Welcome
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The meeting was declared open at 10.01am. The Chair acknowledged the traditional custodians of the land and paid respects to Elders past, present and emerging.

The Chair welcomed Tim Griffiths, Executive Director Operations, to the meeting. Tim provided an overview of his diverse background to the Board, and noted the benefit of his recent orientation visits to a number of sites across the LHD.

Item 1.2	Conflict of Interest Declarations
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No additional changes in material circumstances were noted at the meeting.

Item 2	Confirmation of Previous Minutes
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Item 2.1	Confirmation of Minutes of Meeting on 1 April 2021
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The Minutes of the Board meeting held on 1 April 2021 were accepted as a true and accurate record of the meeting.

Item 2.2	Confirmation of Minutes of Meeting on 1 April 2021 for Public Disclosure
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The Minutes for disclosure of the Board meeting held on 1 April 2021 were accepted as a true and accurate record of the meeting.

Item 3	
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Item 3.1	
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The Board reviewed and discussed the action list.

Item 4	
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Item 4.1	
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A/DQS presented a Patient Story from SERH, detailing the experience of a patient admitted to the medical ward for a two-week period before being moved to the Sub Acute Rehabilitation Unit (SARU), where the patient stayed for around eight weeks. The patient spoke of the positive and kind support that was provided at SARU and the benefit of being able to rehabilitate close to home. Small things like being able to tend to the garden, and the interaction with other patients contributed to the overall very positive experience. The patient commented that the staff were like family to her. The story serves as a reminder when we are planning services, to understand from patient stories, what really matters to the patient.

Item 4.2	Aboriginal Health presentation
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Manager Aboriginal Health provided the first quarterly Aboriginal health presentation to the Board.

The Chair proposed creation of a new Board Sub Committee around Aboriginal Health.

Today's presentation detailed the governance, frontline service delivery and key stakeholder relationships and partnerships involving Aboriginal health. The presentation included key priorities including implementation of culture change strategies to promote positive working relationships is a priority for frontline service delivery in the LHD.

DDIC noted a recent positive result for the LHD in the reduction of Aboriginal women smoking during pregnancy acknowledged by the NSW Cancer Institute.

A review of the Aboriginal Health staffing profile is underway with the aim to increase attraction, retention and career progression of Aboriginal and Torres Strait Islander staff.

The development and formalisation of MOU's with key stakeholders is an area of focus to improve service integration and streamline the use of resources, all with a view to improving health outcomes for the community.

A Board member asked about cultural supervision, and support for the Aboriginal health workforce. MAH responded that cultural supervision is important to ensure that Aboriginal Health staff are holistically supported and feel included.

A Board member asked about collaboration with other departments such as those managing social housing. MAH advised that, in Eurobodalla and Bega, with larger Aboriginal communities, there are established relationships with a range of agencies. Representatives from these agencies meet regularly.

A Board member asked about the cultural appropriateness of the design for the new build at Eurobodalla. MAH advised that she is working closely with HI and a reference group has been established. Plans are underway to arrange to walk the land during Reconciliation Week. There has been strong support by local Aboriginal women to ensure that they are able to birth on country.

A Board Member asked about engagement in suicide reduction programs. Aboriginal Health Workers (AHW) are often first responders to ED following a suicide event. AHW do not have mental health intervention, but are engaged as part of the mental health team. DMHDA advised that some Towards Zero Suicide funding will be used to employ an Aboriginal engagement officer to determine and evaluate strategies to implement across the LHD.

An issue for the Aboriginal community rehabilitation units being located off country, with no facility in the LHD. Admission criteria and length of the waitlist to access rehabilitation services are barriers to service access.

The Board noted the report and support the forward strategy outlined. The next update to the Board will be in August, when a Draft Terms of Reference for an Aboriginal Engagement Sub Committee will be presented.

ACTION: Provide Aboriginal Health presentation and Draft Terms of Reference for an Aboriginal Engagement Sub Committee to the August Board meeting.

Item 4.3

An overview of the LHD's COVID response and vaccination of staff was provided. The LHD, working with Liverpool, Wollongong and ACT Vaccination Hubs have provided vaccinations to staff from NSW Health, NSW Pathology, HealthShare and NSW Ambulance. Outreach clinics have occurred in SERH, Cooma and Goulburn.

The majority of Phase 1a (High risk priority staff including ED, ICU, COVID clinics) in Southern NSW LHD staff have now received both doses of the vaccination.

The LHD is now responsible for vaccination of all Phase 1a and Phase 1b health workers including aged care and disability, emergency workers, contacts of quarantine workers, critical workforce including meat workers, the elderly and our own RACF residents.

On 19 April the LHD commenced an Astrazeneca vaccination hub in Queanbeyan. A mobile clinic is visiting each site in the LHD.

The LHD is also working with our local community health and mental health staff to identify vulnerable population members unable to access vaccination through their GP.

Vaccination has provided an opportunity to upskill and provide additional experience to junior immunisers through attendance at vaccination clinics in Sydney and Wollongong.

The Board noted, with appreciation, the work being done around the vaccination rollout.

Item 4.4

Restructure Implementation Update

The Chair advised of a meeting with DDPW on 5 May 2021 where he was advised of DDPW's intention to resign. The People and Wellbeing team has been advised, and an announcement provided to the LHD today.

A/DDPW advised that the restructure is on track. The LHD's recruitment timeframe has been greatly

reduced and streamlined. Support is being provided to affected employees.

The Board noted and commended the progress with the restructure.

Item 4.5 Parliamentary Inquiry into Rural and Regional Health

No additional submissions directly related to the LHD have been received. General themes include access to specialist services, and access to GP's.

Item 4.6 Medical Lead Diagnostic Review

EDMS detailed the findings following a diagnostic review of medical services across the LHD, undertaken by the District's Medical Leads. EDMS is looking at standardising processes and ways of working to ensure best practice is being applied at every site.

A briefing was provided detailing the areas for immediate focus including ED and ICU models of care, and priorities for the next three months for each of the sites.

A Board member noted their support for the Medical Leads and asked about a detailed plan to ensure appropriate governance for identified risks and planned mitigation. The CE advised that this is included in the Operational Plan which will be provided at the July Board meeting.

The Board noted the positive aspects of a doctor-led program providing accountability and supporting decision making.

The Board noted the information provided and supported the proposed way forward.

Item 4.7 MPS Plans

GM (M) provided an overview of the three Multipurpose Services within the LHD. All three MPS facilities are within the Monaro Network. GM (M) noted the small, and aging populations of the communities where MPS are located.

Wait lists apply at all sites for Residential Aged Care beds. Braidwood are actively recruiting to support opening of additional beds.

MPS challenges including the ageing population in all communities, and the difficulty of staff recruitment. Virtual care were discussed, noting access to reliable internet is a consideration when planning implementation of virtual care programs in small regional towns.

DDIC advised that the LHD is accessing funding for virtual care in small sites, and recruiting to a Director Community Care position. The Royal Commission into Aged Care summary report will assist to determine appropriate service models.

A Board Member asked about home care package funding. DDIC advised that there are four packages at Delegate, none at other sites. The LHD has brokerage arrangements in place with private providers.

GM (M) advised that the LHD maintain a close working relationship with the Snowy Monaro Council and are involved in planning for Snowy 2 as the project will have a significant impact on the LHD.

The Board noted the information and requested a future update. The Board agreed to support the recommendations including standardising governance of MPS facilities.

Item 4.8 Governance, Risk and Audit – Risk Appetite, Accellion cyber security breach and Diligent Boards software

MGRA spoke about the importance of the LHD's Risk Appetite Statement (RAS) to drive performance management. The RAS is tied to business as usual, to inform decision making and risk management.

The Risk Appetite Framework update will bring together Murrumbidgee and Southern's current frameworks and provides direction, identified thresholds and triggers. A process is needed to escalate to Board any risks that are outside the RAS is to be developed to allow the Board to consider acceptance or additional mitigation that will bring the risk back to within the risk threshold.

A Draft Risk Strategy is almost complete, and will require Board endorsement in the coming months.

A Board member asked about the Government's definition of sustainability. MGRA responded that it is locally defined as the impact that it has on our service, taking into account climate, finance, etc.

The Board noted the work being undertaken with regard to development of the RAS and requested a further update at the August 2021 Board meeting.

Diligent Boards

MGRA outlined the benefits of moving to the Diligent Board Paper Management system, which is currently being purchased and implemented at Murrumbidgee LHD.

A Board Member noted that the Board had previously considered Diligent Boards and had determined not to proceed.

ACTION: MGRA to provide a Diligent Boards proposal to the June Board meeting for consideration.

Accellion cyber security breach

MGRA provided an overview of the Accellion cyber-attack and actions taken as a result of the attack. Accellion specialises in secure file sharing and collaboration. NSW Health staff, predominately from the Health Information area use Accellion for transfer of large files. A data breach occurred where the LHD had 34 files stolen, with one rated as a high risk. The LHD are awaiting advice on recommended and agreed actions to be taken. The issue is being managed at the State level.

The CE provided an update to the Board on current issues including priorities to 30 June which include focus on achieving the best possible finish to the 2020/2021 year and planning for a positive start to the 2021/2022 year.

The Bombala and regional GP situation is a high priority for resolution, as is planning for the roll out of community vaccination. Implementation of recommendations from the Medical Lead Diagnostic review and development of the Cooma Integrated Action Plan remain priorities.

The CE explained the significant challenges regarding rural practice. The current situation in Bombala has resulted in community and political interest. The Bombala Medical Centre (BMC) had been run by a single GP for 34 years. Accreditation lapsed in 2015. The practice was purchased by four GP's. All have all since advised they are no longer able to provide services.

The LHD have arranged a locum to work between the MPS and BMC to the end of May 2021, with a plan for extension if needed. An opportunity has arisen for the LHD to determine solutions and models that could be replicated more broadly. The LHD is leading a working group involving key stakeholders.

An opportunity has presented, with consent from the owner of BMC, for the LHD to be involved in options to support medical services. An Aged Care Nurse Practitioner model is being scoped. This model would be transferrable to other small rural communities.

A Board member asked about Coordinare's role. DDIC advised that the PHN can provide support but is not able to take over and provide staff to work for the private business. This also applies to the Rural Doctors Network.

A Board member asked about the risk of other impacts relating to engaging regional GPs, such as visas, immigration, and policy issues. The CE advised that the recent meeting with Minister Coulton and the Deputy Premier was positive, with regular updates to be provided and political will to see this matter progress. Strategically and operationally this is both a challenge and an opportunity. An update will be provided at the next Board meeting.

The recent launches of Elevate for the three Networks and Mental Health were very positive.

The Strategic Plan is on track to be brought to Board as a draft at the June meeting, then for endorsement in July. Progress to finalising the State Plan has been beneficial to development of the LHD's plan.

ACTION: Presentation of the Draft Strategic Plan at June Board meeting.

Planning for community health provision at Batemans Bay, continues alongside commencement of the Eurobodalla project. The Local Member has been briefed as has the Secretary.

The clinical trials hub application has progressed. Awaiting result of the submission.

The LHD is continuing to work on surgical opportunities with ACT. Deputy Secretary Dr Nigel Lyons has committed to work closely with the LHD to progress cross border policy.

A Board member asked of evidence of reluctance of people to take up vaccination. The CE advised that this was a major focus at a State level.

The Board noted the CE's update.

Item 5.2	Board Chair update
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The Board Chair noted his involvement on the selection panel for Board Chairs for a number of LHDs. The Board Chair also relayed advice from MoH regarding staff welfare. The Chair asked that managers and senior staff be aware of the pressure on staff to maintain business as usual in the face of the ongoing COVID pandemic and vaccination roll out.

Item 6	Accountability
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Item 6.1	Medical and Dental Appointments Advisory Committee Draft Minutes
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Noted.

Item 6.2	Health Care Quality Committee (HCQC) Board Report and Draft Minutes
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Noted.

Item 6.3	Audit and Risk Committee Meeting update
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Noted.

Item 6.4	Performance Committee Minutes
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Noted.

Item 6.6	Community Engagement Committee
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Item 6.7	Finance and Recovery Report
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DFP advised that the March close had identified costs coded incorrectly.

The error was identified through the District Network Return and followed up with the financial accounting team. The error came about following a change in the billing process by NSW Health Pathology. In September 2020, the final structure was released and a number of staff left the Finance Directorate. New staff have now commenced and a governance practice utilised by MLHD of looking at trend over two years has been implemented.

A Board member stressed that as a Board, there is a responsibility to ensure appropriate systems relating to appropriate governance are in place. Governance and reporting to address any system, and human error is critical. DFP advised that a Business Analytics Manager has now commenced and will provide valuable support.

A Board member noted the risk of a two year trend view due to the impacts of Covid and bushfires over the past years. The Performance Committee have been advised of, and support the forward plan. The CE discussed current analysis underway regarding potential deterioration regarding the projected end of year financial outcome. A Board briefing will be arranged when the current analysis is completed. All Board members will be invited to attend. CE also noted recent conversations with MOH regarding activity and funding which indicates a level of confidence and support from the MoH.

Item 6.8	Bushfire Recovery Update
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Noted.

Item 7	For Endorsement
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Item 7.1	Organisational Risk profile – April 2021
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MGRA provided an overview of the Organisational Risk Profile as at 1 April 2021, which was endorsed by the Board.

Item 8	For Information Only
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The Board noted the summary of correspondence received and sent during March/April 2021.

Item 8.2	League Table – February 2021
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Noted.

Item 8.3	Service Agreement – Budget Setting
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DFP provided an overview of Service Agreement 2021/ 2022 negotiations with the Ministry.

Item 8.4	2021 Board Work Schedule
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Noted.

Item 8.5	2021 Board meeting Schedule
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Noted.

Item 9	Business Without Notice
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Item 10	Close of Board Meeting
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The meeting closed at 1.07pm.

Date of Next Meeting: Thursday, 3 June 2021 at SERH, Bega.