

Western NSW LHD Board Meeting May 2021
 Day Care Room, Blayney MPS
 Wednesday 5 May 2021, 9:30 — 15:45 AEST

Welcome

Blayney MPS HSM, Kathleen Hillier, welcomed the Board members at 9.30am and spoke to the Board members before conducting a site visit through the MPS.

ACKNOWLEDGEMENT OF COUNTRY

The meeting commenced at 10.20am with the Chair providing an Acknowledgement of Country.

Attendance of Members

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

In Attendance

Scott McLachlan, Chief Executive, Mark Spittal, Executive Director Operations; Peter Bonnington, A/Executive Director Planning, Performance and Funding; Joanna Lemmich, A/Executive Director Quality, Clinical Safety and Nursing; Dr Scott Clark, DMSEC; Lauren Nott, Secretariat.

1 Apologies

John Walkom, Adrian Fahy Exec Director Quality, Clinical Safety and Nursing

2 Conflicts of Interest

Dr Canalese advised he has now joined the Board of Orana Garden Retirement Village.

Action

Conflicts of interest for Dr Canalese to be updated.

Action by: L Nott Action Due: ASAP

3 Draft minutes of Board meetings held 7 April 2021

Minutes of the Board meeting held 7 April 2021 were endorsed by the Board.

4 Action Register from Board meeting held 7 April 2021

Progress on action items was noted.

5 Chair Report

The Chair advised he attended the ACI and CEC Board meetings in their new premises. The appointment of Board Chairs is now expected in June with the appointment of new members to follow.

6 Chief Executive Report

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

- High activity continues across the state.
- There is an increased focus from Ministry on performance. The LHD's quarterly performance review with the Ministry will be held on Friday, 7 May 2021.
- Financial performance continues to be strong.
- COVID: There is some concern with overseas travelers in quarantine. The vaccination program continues however there is a slowing of vaccination rates.

Pfizer vaccination has commenced within the LHD. A broad outline of the vaccination rollout across the LHD was given.

- UPHI – Hearings were held in Deniliquin (29 April) and Cobar (30 April). An outline of the Cobar hearing was given. The CE, Dr Shannon Nott and Brendan Cutmore attended on behalf of the LHD. The Committee would like to visit Wellington Hospital before their hearing on 18 May. The LHD have been invited to attend the Dubbo Hearing on 19 May.
- A project manager has been engaged for Cowra Hospital redevelopment

6.1 WNSWLHD Performance Scorecard

The scorecard was noted by the Board and a brief discussion held.

6.2 NSW Health League Table

The Health League Table (February 2021) was noted by the Board.

6.3 UHPI Schedule 30 April 2021

The UHPI schedule was noted by the Board.

6.4 WNSWLHD Energy Projects

The listing of WNSWLHD energy projects was noted by the Board.

7 Clinical Operations

7.1 Executive Director Clinical Operations Report

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

- The surgical recovery program and efforts being taken to meet targets.
- The focus for Operations for the next 6-9 months will be on EDs, whole of hospital and surgical flows.
- Recruitment for a Medical Cardiologist in Dubbo has commenced.
- A report will be provided on EDs next month.

8 Quality, Clinical Safety and Nursing

8.1 Patient Story - Palliative Care/escalation to Police/Ambulance NSW

Ms Lemmich spoke to the patient story which was noted by the Board. A discussion was held. Mr Spittal is actioning this with NSW Ambulance.

8.2 Executive Director Quality, Clinical Safety and Nursing Report

Ms Lemmich spoke to the report which was noted by the Board highlighting:

- Dr Grygiel issue has been finalised. He is no longer registered as a medical practitioner.
- Neonate/boarder baby issue referred to in the papers was not in WNSWLHD
- Information requested by HCCC re Bourke Hospital has been provided.
- CEC is rebuilding the curriculum for the Clinical Leadership Program.
- RGNET funding for the coordinator position is to continue.
- Patient Experience – 2.5k to 3k incidents of feedback have been received from variety of sources.

8.3 Health Care Quality Committee Terms of Reference

Director O'Brien spoke to the briefing document which was noted by the Board. A brief discussion followed.

Recommendation

The Board endorsed the updated terms of reference for the Health Care Quality Committee.

All members were in favour.

8.4 Health Care Quality Committee (HCQC) Meeting 28 April 2021

The draft minutes of the HCQC were noted by the Board.

8.5 HCQC Chair Comments

Ms Lemmich highlighted the issue of an anonymous complaint raised in Business Without Notice. A discussion was held.

9 Directorate Update - Allied Health and Innovation

Mr Richard Cheney, Exec Director Allied Health and Innovation joined the meeting.

Mr Cheney spoke to the directorate update document and a discussion was held. The discussion included:

- The changes in the directorate including service delivery for palliative care, specialist intellectual disability and the virtual allied health team were outlined.
- Research strategy – while the three year program is coming to an end the LHD is looking forward growing the research agenda.
- Ethics committee is not meeting the 45 day benchmark. Work is being undertaken with ToR and Chair of committee to address this as the timeline doesn't stop when work is returned to applicant for review/revision.
- Negotiations have been held with Dubbo to create a full time social worker from Dubbo servicing the northern area of the LHD virtually.
- The focus for palliative care remains on the patient's preferred place of death. There is now a palliative care advice service overnight which allows 24 hour support. Bereavement funding is being sought to work with partner organisations.
- There is concern for support for a number of patients who do not qualify for NDIS but are in RAC facilities.

Mr Cheney left the meeting

10 Audit and Risk Annual Update by Chair

Ms Leah Fricke, Chair Audit and Risk Committee joined the meeting via phone

Ms Fricke spoke to the meeting raising the following:

Financial audit

The Audit and Risk Committee (ARC) are exceptionally pleased with the executive and audit team. The preparation work undertaken by the team is some of the best audit committee work she has seen. The LHD continues to have a good relationship with the State Audit Office. While Ms Fricke made no comment re underlying financial resources of the LHD the ARC take comfort that the financial audit processes in place allow for a rigorous set of accounts.

Internal audit capacity

COVID gave an opportunity to understand how the internal audit team could continue to assist efforts to support the organisation without having to go out in person. Activities were constrained in a number of ways but it was pleasing that the team have embraced technology and could continue to work, give assistance and provide reports without going out into the workplace.

While the internal audit team has not addressed all 'normal' matters the organisation still has meaningful value from team. The risk assessment process can take into account any audits not undertaken during COVID.

Risk management process

The MoH is aiming for a more refined statewide approach. The ARC is optimistic that their focus and approach to risk management is adaptable enough to allow for any changes needed by the MoH. The state wide approach will provide a forum for constructive two way conversation around risks, challenges and mitigating activities. It should see valuable information coming back to compare and contrast to others doing similar activities. The ARC will be following the new reporting processes for MoH to determine any impact. Feedback will be given.

LHD has continued to focus on risk management. While there has been an uplift in this area, there is still room to grow to get to a mature risk function. This is made harder with the changing requirements of MoH.

A discussion was held which included the pros and cons of in-house legal support for the LHD. Ms Fricke suggested a key consideration would be determining the skill set and specialties that would be needed and if it would serve the LHD if they had their own in-house council for matters that arise on a day to day basis. From a risk perspective it is important that individuals dealing with matters with certain legal risks have an understanding of the process for escalation and know who to escalate to.

The CE advised an analysis of legal support for the past three years showed this was spread equally across industrial, clinical/ coronial and commercial areas. The LHD would still need to contract out 75-80% if there was one in-house resource. The MoH in-house team is helpful, responsive and able to refer to specialists when needed.

The Board Chair thanked Ms Fricke and asked that the Board's thanks be passed on to other ARC members for their diligence and commitment to the LHD.

Ms Leah Fricke left the meeting.

11 Planning, Performance and Funding

11.1 Financial Performance Report

Mr Bonnington introduced himself and spoke to the report which was noted by the Board and highlighted:

- Predicting favourability to improve throughout the year.
- Service agreement is being worked on at present with negotiations continuing through to June with MoH.
- VMO costs includes overlay of COVID response and offsets some vacancies, increase in activities.

Motion

The Board endorsed and supported the comments made by Ms Leah Fricke, Chair ARC, recommending the finance and internal audit team on the high level of work undertaken. This is to be passed on to the staff involved.
All members were in favour

11.2 Finance & Performance Committee 23 April 2021 draft minutes

The draft minutes of the F&P Committee were noted by the Board.

11.3 Finance & Performance Committee Chair Comments

Director Bennett highlighted:

- Reviewed annual timetable of F&P committee was adopted.
- A quarterly update was given on the sustainability plan.

Mr Jeff Morrissey, Exec Director Corporate Services and Clinical Support and Ms Angela Firth, A/Director HIU joined the meeting.

11.4 2021-22 Annual Priorities

Ms Firth spoke to the WNSWLHD 2021-22 Annual priorities brief which was noted by the Board. A discussion was held.

- Looking at current KPIs compared to proposed 21/22 service agreement. State versus LHD KPIs are to be identified.
- The LHD Program Management Office rolling out 'My annual plan' for directorates, facilities which is linked to annual priorities.

11.5 Organisation Performance Reporting

The WNSWLHD Performance Review brief was noted by the Board. Mr Spittal gave an outline from the Operations perspective. A discussion was held and feedback provided.

11.6 Dubbo Locality Clinical Services Plan

Ms Firth spoke to the brief "Dubbo, Narromine and Wellington Health Services – a Plan for delivering care together (CSP)" which was noted by the Board. A discussion was held.

A rigorous community engagement process will be undertaken which will include other partners/organisations. While it is a whole it is a regional CSP it needs to clearly show substantial benefits/enhancement for each local community.

11.7 Canowindra Clinical Services Plan

Ms Firth spoke to the brief regarding the development of a CSP for Canowindra which was noted by the Board. A discussion was held.

Funding has been made available to develop a precinct plan. Conversations have been held with Mayor and Minister regarding options including a HealthOne.

12 Asset Management and Capital Planning

Mr Morrissey and Ms Firth spoke to the briefing document and gave a presentation (refer to papers) regarding 2021 Asset Management and Capital Investment Planning. A discussion was held.

Recommendation

The Board endorsed the proposed capital investment priorities for 2021:

- Blayney MPS
- Bathurst Health Service
- Key Health Worker Accommodation Plan
- Dubbo Rural Locality Network
- MPS Stage 6

All members were in favour

Mr Morrissey and Ms Firth, left the meeting.

13 Medical and Dental Appointments Committee (MADAAC)

13.1 MADAAC meeting held 21 April 2021 draft minutes

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

13.2 MADAAC Chair Comments

Director Treweeke provided a summary of appointments made.

14 Audit and Risk Committee (ARC)

14.1 Enterprise Risk Register

The CE spoke to the brief and supporting documents which were noted by the Board. A discussion was held.

14.2 ARC Meetings held 19 March and 15 April 2021 draft minutes

The draft minutes of the ARC Meetings held 15 March and 19 April 2021 were noted by the Board.

14.3 ARC Representative Comments

Director Bennett advised the Board that the ARC had approved the 31 March 2021 soft close financial statements for presentation to the NSW Audit Office, and highlighted the positive comments from the ARC re the high standard of work undertaken by the finance and internal audit team.

15 District Clinical Council (DCC)

15.1 DCC meeting held 21 April 2021 draft minutes

The draft minutes of the DCC meeting held 21 April 2021 were noted by the Board.

16 District Medical Staff Executive Council (DMSEC)

16.1 DMSEC Representative Comments

Dr Scott Clark advised that at the last meeting,

- A discussion was held regarding membership of the MSEC including Dr Harwood resigning earlier in the year. Dr Nott is looking at getting greater representation from smaller towns.
- A medical staff council for Mental Health and Drug and Alcohol should be operating in near future.
- UHPI discussion held. A letter was sent to UHPI requesting a meeting. Drs Kealy-Bateman, Rice and Greenberg have accepted an invitation for a private briefing with the committee when they are in Dubbo on 19 May 2021.

17 General Business and Business Without Notice

17.1 District Ageing Strategy

Ms Julie Cooper, Executive Director Integrated Care, joined the meeting via video

Ms Cooper spoke to the briefing note and supporting documents which were noted by the Board. A presentation was given (refer to papers). A discussion was held and feedback given.

The Board felt the overall document was well prepared and the overall tone and graphics well done.

Recommendation

The Board approved the District's Ageing Strategy and the three accompanying operational plans for Care in the Community, Care in Hospitals and Residential Aged Care in MPSs with the feedback adopted.

All members were in favour.

Ms Cooper left the meeting.

17.2 Pulse Survey Results

The CE spoke to the brief which was noted by the Board and a discussion held.

A brief on the system and process for how the LHD deals with bullying will come to the Board in the future.

17.3 Review of Board Charter

The Chair led a discussion regarding the Board Charter which was due for review by the Board Directors.

Changes were agreed to including changes to the section on Board sub-committees.

Any further comments are to be sent to the Board Chair and Secretariat.

Action

WNSWLHD Board Charter to be updated as discussed.

Action by: L Nott Action Due: 2 June 2021

17.4 Site Visits

A brief discussion was held. The members supported the proposed itinerary noting Director Cooke will be an apology.

18 Reflection of Meeting

A brief discussion was held.

There being no further business the meeting was closed at 3.40 pm

Signed:  Date: 02 June 2021