

Western NSW LHD Board Meeting November 2020
 Parkview Meeting Room (upstairs), Orange Health Service
 Wednesday 4 Nov 2020, 9:30 — 15:30 AEDT

ACKNOWLEDGEMENT OF COUNTRY

The meeting commenced at 9.40 am with the Chair providing an Acknowledgement of Country.

Attendance of Members

Scott Griffiths (Chair), Dr Joseph Canalese, Fiona Bennett, Jason Cooke, Dr Colin McClintock, Amanda O'Brien and John Walkom.

In Attendance

Mark Spittal, A/Chief Executive, Josh Carey, Executive Director Planning, Performance and Funding ; Debbie Bickerton, A/Executive Director Operations; Adrian Fahy, Executive Director Quality, Clinical Safety and Nursing; Dr Scott Clark, District Medical Staff Executive Council; Julie Dunn, Secretariat.

1 Apologies

Darren Ah See, Paul Mann and Joan Treweeke,

2 Conflicts of Interest

Nil to add

3 Draft minutes of Board meeting held 7 October 2020

Minutes of the meetings held 7 October 2020 were endorsed by the Board.

4 Action Register from Board meeting held 7 October 2020

There were no outstanding actions.

5 Chair Report

Northern Medical Sector Services Tender

A meeting was held with the Bourke Shire Council on 12 October to discuss the tender. The Chair and Acting Chief Executive advised the council that the plan was being introduced to enhance services not to diminish them. Council has agreed to monitor progress once implemented.

The Chair and Acting Chief Executive also attended a further meeting with the Lightning Ridge Rotary Club. Director Treweeke received feedback from the Rotary Club that they were appreciative of the conversation.

The Chief Executive is due to receive recommendations from the Tender Committee in November. A decision will be announced as soon as possible. A brief discussion was held.

Future Health Strategies Engagement Session The Chair and Board members attended a virtual session on 20 October. There were a number of technology issues during the 90 minute virtual session. Mr Spittal apologised to Board members that they did not get the experience they expected.

The Chair continues to participate in fortnightly COVID updates with the Secretary. These have covered:

- All states are ready for a second or third wave of the virus
- COAG has ceased to exist, it is now the Ministerial Council
- It is possible that a vaccination may be available in early 2021.
- Returns from overseas are expected to increase, this may pose a further spread of infection. There has been discussion about overseas travelers may be required to quarantine at home rather than in hotel
- The state budget will be released 17 November. The focus will be on enhancing ED patient management, hospital avoidance and towards zero suicide.

6 Chief Executive Report

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

- COVID testing rates in the district have reduced markedly now that the summer is approaching and fewer people are presenting for a test.
- Gulgong:
 - The District and former VMO Dr Nebras Yahya have reached an agreement for Dr Yahya to provide VMO services at Gulgong MPS. The finalisation of this contract is underway and it is anticipated that Dr Yahya will commence working at the hospital by mid November 2020. The District will continue to attempt to recruit other GP VMOs to support Gulgong MPS in order to ensure that there is appropriate work-life balance. Dr Yahya will be supported by the District's Virtual Rural Generalist Service.
 - An agreement has been reached with NSW Ambulance for interim bypass of high acuity cases, at the clinical judgement of the paramedics.
 - A full RCA process is taking place regarding the recent unexpected death at Gulgong, with a report expected in Dec/Jan.
- Tresillian have proposed that the LHD develop a 4-bed Tresillian Residential Unit in the Cowra Health Service facility to enable families residing throughout the District to access a specialist residential service in a rural setting. The suggestion is that services could work collaboratively in partnership between WNSWLHD and Murrumbidgee LHD (MLHD). The entire LHD population would sustain one such service at most and the LHD perceives that Cowra has significant deficits as a location for a residential service if one was to be developed in the district.
- The Chair and the Acting Chief Executive will be attending the Bilateral Regional Health meeting on 5 November. Minister Hazzard, Minister Taylor, The Hon. Mark Coulton and other Commonwealth and State dignitaries will be in attendance. The agenda will canvas rural issues related to workforce and alternative structural models.
- The Acting Chief Executive thanked Director O'Brien for her attendance at the recent WNSWLHD Health Awards.

6.1 Annual Performance Letter

The annual performance letter from the Ministry was noted by the Board. The Ministry have advised that the District is doing well.

6.2 WNSWLHD Performance Scorecard

The scorecard was noted by the Board.

6.3 NSW Health League Table September 2020

The league table was noted by the Board.

6.4 WNSWLHD 2020 Living Quality and Safety Awards

The Living Quality and Safety Awards magazine was noted by the Board.

7 Clinical Operations

7.1 Executive Director Clinical Operations Report

Ms Bickerton spoke to the report which was noted by the Board and highlighted:

- The potential to network Wellington with Dubbo Hospital is being explored, including medical, managerial and nursing governance and the potential to address rostering difficulties in a more sustainable way. A meeting with staff is scheduled for next week.
- Two new hospital avoidance strategies have been implemented at Orange; Eating Disorder/Anorexia Patient Pathway and Hyperemesis in Pregnancy. Patients are now cared for under HiTH in the ambulatory care unit. The Buvidal dosing clinics at Bourke have commenced. The program is running well and has already received 10 referrals. The introduction of the clinic allows staff that no longer have to do the daily dosing time to focus on the health and wellbeing of patients.
- Cancer services are working on a project that will enable structured education and support for the AHWs to promote the importance of cancer services for their communities as part of their core business.
- The Orthopaedic Acute Service Unit (OASU) model will provide a single emergency orthopaedic service across the campuses of Bathurst and Orange.
- Weigelli/Orana Haven, Bourke Aboriginal Corporation Health Service and Far West LHD have joined forces in a new project to address drug and alcohol needs in the Bourke community.
- Dubbo Hospital redevelopment: handover for the stage 4 building will occur on 18 January 2021. Cancer Centre handover has been delayed by 12 weeks and should occur mid-2021.
- The Board noted the #EndPjparalysis 90 day challenge looked very encouraging.

8 Planning, Performance and Funding

8.1 Financial Performance Report

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

- The financial result of the LHD continues to be impacted by the pandemic response. At this stage budget relief is being provided retrospectively for COVID related expenditure, and is not guaranteed to match expenditure incurred. As a result forecast expenditure in this area currently shows a substantial deficit to budget.
- The full year forecast for baseline expenditure is currently unfavourable \$8.02m. This is in line with previous expectations.

8.2 Finance & Performance Committee 27 October 2020 draft minutes

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

8.3 Financial Sustainability Plan

Mr Carey spoke to the briefing document which was noted by the Board. A discussion was held.

The Board sought clarification re the downsizing of the fleet. It was confirmed that the total number of vehicles would be assessed and reduced if not needed, with vehicles downsized to an appropriate size according to need.

Recommendations

The Board:

1. Endorsed the WNSWLHD Sustainability Plan, including the 11 areas outlined in Appendix B.
2. Endorsed the six priority areas that will be implemented over the next 12 months.
3. Noted the proposed governance structure and that the F&P Committee will receive ongoing quarterly updates. The Board will be updated on a 6 month basis.

All members were in agreeance.

9 Planning

Ms Maryanne Hawthorn, Director Health Intelligence Unit and Ms Angela Firth, Manager, Planning and Service Development joined the meeting.

9.1 Grenfell Clinical Services Plan

Ms Hawthorn spoke to the brief and supporting documents which were noted by the Board. A discussion was held noting:

- Grenfell MPS has been noted in the District's 2018 Asset Strategic Plan as a facility requiring redevelopment due to the ageing infrastructure.
- The Plan has been developed in consultation with staff and community, and with strong involvement from the local Health Advisory Council.
- At this stage there was no identified funding for the plan.

Recommendation:

The Board endorsed the Grenfell MPS Clinical Services Plan 2020 – 2030 V1.8 (Tab A, with accompanying data document at Tab B).

All members were in agreeance.

9.2 Cowra Clinical Services Plan

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

A final plan will be presented to the Executive and Board in December.

Recommendations:

1. The Board noted the progress on the Cowra Clinical Services Plan,
2. Feedback was provided to Ms Hawthorn on the draft Cowra Clinical Services Plan (Tab A) and supporting Technical Paper (Tab B).

All members were in agreeance.

Ms Hawthorn and Ms Firth left the meeting.

10 Quality, Clinical Safety and Nursing

10.1 Patient Story -Lightning Ridge

Mr Fahy spoke to the patient story which was noted by the Board.

10.2 Executive Director Quality, Clinical Safety and Nursing Report

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

- New guidelines on Elevating the Human Experience has been released by the Ministry. The mission statement aligns with our strategic plan.
- Infection Prevention and Control: substantial work has been undertaken to support the readiness of staff working in private RAC facilities should there be a COVID outbreak. Some sites have limited capacity due to infrastructure, this will be tabled and discussed at the Pandemic meeting.
- Aerosol generating procedures: Cadia mines have donated a porta count machine to Orange Hospital for fit testing of the P2 N95 disposable respirators. The CEC have allocated two fit testing Accufit machines to the LHD.
- BHI 2019 Adult Admitted Patient Survey results showed the District performed above the NSW average in all areas of overall care ratings.

10.3 Health Care Quality Committee (HCQC) Meeting 28 October 2020 draft minutes

The draft minutes from the HCQC meeting were noted by the Board.

10.4 HCQC Chair Comments

Director O'Brien highlighted

- The presentation from Dubbo Hospital was informative
- Following the recent media attention, there has been an increase in the rate of complaints, including historical complaints that are up to two years old.
- Letter of support has been sent to the staff by the Chief Executive and the Board.
- It was noted by the Board that complaints highlight issues and assist the District to improve service delivery.

11 Medical and Dental Appointments Committee (MADAAC)

11.1 MADAAC meeting 21 October 2020 draft minutes

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

11.2 MADAAC Chair Comments

In the absence of Director Treweeke, Director Canalese provided a summary of appointments made.

12 District Clinical Council (DCC)

12.1 DCC Meeting 21 October 2020 draft minutes

The draft minutes from the DCC meeting were noted by the Board.

13 Presentation - Cyber Security

Dr Peter Croll, eHealth and Michelle Harkins, WNSWLHD CIO joined the meeting via video

Dr Croll provided a presentation. Ms Harkin spoke to the briefing document which was noted by the Board. A discussion was held.

Ms Harkin and Dr Croll left the meeting.

14 District Medical Staff Executive Council (DMSEC)

14.1 DMSEC Representative Comments

Dr Scott Clark advised that quorum was not met at the September MSEC meeting. Dr Clarke provide an overview of the discussion held at the meeting despite the lack of quorum.

15 Directorate Update

Mr Brendon Cutmore, Executive Director Aboriginal Health and Wellbeing joined the meeting.

Mr Cutmore provided an Acknowledgement of Country

15.1 Aboriginal Health and Wellbeing

Mr Cutmore spoke to the report which was noted by the Board and provided the following highlights:

- The focus this quarter has been to support communities through the COVID-19 pandemic.
- Mr Cutmore acknowledged the effort of the staff and volunteers who stood up the emergency response team to minimize the risk of spread in Orange, Parkes and Bathurst.
- Communication in remote areas is not reaching communities in a timely manner. Services are being developed with local people, such as letter box drops and radio announcements to ensure timely distribution of information.
- Planning has commenced for the roll out of a vaccine when it becomes available.
- The results of the Cultural Audit Tool will provide areas of focus when released.
- The health promotion team are not undertaking community activities unless there is a clear COVID plan in place

Action:

An update on Closing the Gap is to be provided to the Board.

Action by: Mr Cutmore Action due: 2 December 2020

Discussion was held on strategies to achieve the 9.4% Aboriginal workforce target and how the District could recruit and support indigenous trainees and staff.

Further discussion was held re the importance of the First 2000 Days of Life,

Action:

First 2000 days of life to be placed on HCQC agenda

Action by: Mr Fahy Action due: Next HCQC meeting

Mr Cutmore left the meeting.

16 General Business and Business Without Notice

16.1 Future of Boards

The Chair and Dr Canalese (Deputy Chair) recently completed a 23 question survey regarding the future of Boards. Questions included:

Range in size of the Board 8-10 is the preferred size

- A reduced Board size may put time limitations on attendance to sub-committees

Selection of Board Members

- Discussion was held about the Board and Chair having a greater say in the recruitment and selection process.

What are the key attributes you want in a Board.

- Applicants need to be from, or have a connection to, the District

MSEC

- The Board is happy with the current rotating arrangement noting it is difficult to have a commitment from one doctor with a clinical load.

Time of meeting

- Some Board meetings for other LHDs run for two hours

ACTION:

Results of survey to be distributed to Board members when received.

Action by: Chair Action due: As soon as received

17 Reflection of Meeting

- Look at alternate venue in the future as virtual attendees had difficulty hearing the meeting.
- Further discussion re presenters reading papers rather than summarising and highlighting key points. Presenters can take their paper as read for example the Cowra and Grenfell papers were comprehensive, if a summary was provided at the meeting it would have allowed more time for discussion.
- The Board agreed the Public meeting went well

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

Signed: _____ Date: _____



Western NSW Local Health District Board
2020 Annual Public Meeting
held via videoconference
Wednesday 4 Nov 2020, 1:00 – 2.00pm AEDT

WELCOME/ACKNOWLEDGEMENT OF COUNTRY

The meeting commenced at 1.00pm with the Chair providing an Acknowledgement of Country.

Attendance of Board Members

Scott Griffiths (Chair), Dr Joe Canalese, Fiona Bennett, Jason Cooke, Dr Colin McClintock, Amanda O'Brien and John Walkom

In Attendance

Mark Spittal, Acting Chief Executive; Josh Carey, Executive Director Finance; Kathy Connell, Executive Director Communication and Engagement, Debbie Bickerton, Acting Executive Director Operations, Julie Dunn, A/Board Secretariat.

Members of the community and health council representatives, Health Service Managers, LHD staff as per attendance list.

Apologies

Darren Ah See, Paul Mann and Joan Treweweke

Chairman's Report – Mr Scott Griffiths, PSM

The Chair thanked all those in attendance and acknowledged members of the Health Councils and their generous time and commitment to their role.

Mr Griffiths reflected on the activities of Western NSW Local Health District in the past 12 months and the impact of COVID-19 on services, staff and communities. COVID-19 had also restricted the ability for the board to visit communities and services on a regular basis during the year. On behalf of the Board, the chair acknowledged and thanked everyone for the work they have done during these difficult times.

Four board members will be finishing their term on the Board in the coming months and include Scott Griffiths, Dr Joe Canalese, Joan Treweweke and Paul Mann.

Chief Executive Address – Mr Mark Spittal (A/CE)

Mr Spittal acknowledged the traditional owners of the land we are meeting on and also those across the whole LHD.

A presentation was given which included an overview of the Local Health District activities, priorities, services, achievements and operating challenges.

Financial Report – Mr Josh Carey

Mr Carey commenced by acknowledging the traditional owners of the land we are meeting on.

A presentation was given outlining 2019-20 financial results including key achievements.

Questions and Open Discussion

Questions and discussion included the following areas:

LHD Board members attending Health Council meetings – if Health Councils would like a representative from the Board to attend one of their meetings an invitation to the Board can be placed through Illona Dunn, Manager Community Engagement

Funding for Dubbo Hospital redevelopment Stages 5 & 6 – More planning is required before funding can be sought for stages 5 & 6 of the Dubbo Hospital redevelopment.

Update for CT Van project (Cobar, Bourke and Walgett) – concrete pads are needed to be prepared at the CT Van locations. COVID-19 has delayed this project.

Grenfell Multipurpose Service (MPS) redevelopment – the Commonwealth covers funding for MPSs. No funding has been earmarked for Grenfell re-development. The clinical services plan for Grenfell has been completed. The government is also waiting on the final report and recommendations from the Royal Commission into Aged Care Quality.

Cowra Hospital redevelopment update – commitment received from the State government. The Clinical Service Plan is in the final draft.

Telehealth – it was acknowledged that more community engagement and information is needed around telehealth to help people understand the benefits and how it is used. The language used for telehealth needs to be reviewed and perhaps use specific service names such as virtual pharmacy rather than the generic term of “telehealth”.

On-call GP services at Gulgong MPS – it was raised by a community person that any doctor recruited to the town needs to also provide on-call services to the Gulgong MPS. It was confirmed by Mr Spittal that the Local Health District is still actively recruiting for doctors to provide services, including on-call, to Gulgong MPS.

Will there be further budget supplement from NSW Health for COVID-19 especially with the cost of increased testing? – the Local Health District is seeking additional funding. Facilities will be reimbursed for the testing at their site. Funding will be on a month by month basis.

There being no further business the meeting closed at 2.10 pm