

Western NSW LHD Board Meeting October 2020
Mudgee Health Service, Large Meeting Room
Wednesday 7 Oct 2020, 9:30 — 15:30 AEDT

Welcome

Mudgee HSM, Ms Caren Harrison, welcomed the Board members at 9.30am and spoke to the Board members before conducting a site visit through the hospital.

ACKNOWLEDGEMENT OF COUNTRY

The meeting commenced at 10.40am with the Chair providing an Acknowledgement of Country.

Attendance of Members

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

In Attendance

Mark Spittal, A/Chief Executive, Josh Carey, Executive Director Planning, Performance and Funding (video); Debbie Bickerton, A/Executive Director Operations; Adrian Fahy, Executive Director Quality, Clinical Safety and Nursing (video);

Dr Liz Mitchell, District Medical Staff Executive Council; Lauren Nott, Secretariat.

1 Apologies

John Walkom

2 Conflicts of Interest

Nil to add

3 Draft minutes of Board meeting held 2 September 2020

Minutes of the meetings held 2 September 2020 were endorsed by the Board.

4 Action Register from Board meeting held 2 September 2020

Action items were progressed.

5 Chair Report

The Chair advised the Council of Board Chairs meeting was held 7 September via video:

- The Minister spoke and thanked Boards and staff for their efforts with COVID and raised the issue of Board sizes, composition and role.
- The Secretary gave an overview of how the agencies within NSW Health functioned together to handle the pandemic. Post COVID NSW Health is looking at future health delivery eg IT, vCare, service delivery, PPPs, decline in private health insurance etc.
- Presentations were given on the impact of COVID in employment and social implications and on NSW Health procurement reforms
- LHD updates included Western Sydney LHD – ED at Westmead and Blacktown, staff engagement and Far West LHD – Closing the Gap at Buronga HealthOne
- A discussion was held re Board reviews and evaluations.

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

- Length of lockdowns, impact of returning people from overseas
- Ongoing easing of restrictions

- Testing rates slowing. Up to six million tests in NSW
- Ongoing concerns re the spread of cases in Victoria
- Mental Health tracker for ED
- Surgery wait lists
- Vaccine

The Chair and A/CE attended the PHN Board meeting held on 25 September 2020 as invitees and were given the opportunity to speak to the PHN Board. The primary interest was in the northern sector medical tender.

Discussions have been held with the Secretary regarding Board member succession plans with recruitment for new members to occur possibly in the new year. The Board discussed this further noting MSEC may be requested to submit a number of nominations.

6 Chief Executive Report

Mr Spittal highlighted:

- Increasingly tight financial situation, 0.3% salary increase for staff.
- Aged Care Commission – the LHD anticipates that any focus by the Royal Commission on nursing staff mix and numbers in residential aged care are unlikely to be more extensive than what the LHD already meets which is considerably higher than in most private RAC facilities. The demand profile for aged care will increase considerably into the future. Modelling is currently being conducted for future planning and provision of services including planning around dementia care in the district.
- The Mental Health Trace report was added as a late paper for the Board's information. The report shows an increase in the rate of young people (15-25 years) accessing mental health support across the state. Main concerns include disruptions to schooling and economic pressure of families. The LHD is mindful of the increase in numbers and higher acuity of mental health patients which is expected to continue into the future.

6.1 WNSWLHD Performance Scorecard

The scorecard was noted by the Board.

6.2 NSW Health League Table

The August 2020 League table was noted by the Board.

6.3 COVID Statewide Surveillance Report

The statewide surveillance report to 15 August 2020 was noted by the Board.

7 Directorate Update

Ms Kathy Connell, Executive Director Communication and Engagement joined the meeting via video

7.1 Communication and Engagement

Ms Connell presented the Directorate update and highlighted:

- Concerns/difficulty in pushing media enquiries through the 'system' in particular in regards to maintaining local context and delays in approval.
- Kate Fotheringham and Kathy Connell work with HSMs when dealing with media issues to ensure the HSMs are adequately prepared.

7.2 Community and Engagement Framework

Ms Connell spoke to the briefing document which was noted by the Board. A discussion was held which included:

- The Human Engagement paper released by MoH last week. This paper will go to a future HCQC meeting.
- The distinction between community, consumer and patient engagement was noted.
- The Board sought clarification re sub regional health groups and linkages to health councils, facilities etc. This model mirrors the operational model. Examples of this would be the 4Ts project or Dubbo, Narromine, Wellington working together with Dubbo unifying the group.
- Very preliminary discussions with some Health Councils have been initiated. The sub regional health groups will give a different layer of engagement above the postcode based health councils, noting that this traditional model is failing in some locations.
- National standards and accreditation necessitates engagement on a broader scale than just health councils.

The Board noted the recommendations outlined in the paper give focus and direction to the Community and Engagement team and recognised the limited resources available. Ms Connell noted the directorate is looking at building the model over 24 months with work on developing resources having commenced.

Recommendations:

The Board endorsed the recommendations and direction for community engagement in LHD as outlined in the briefing document:

1. Adopt and promote an online engagement mechanism to encourage a broader cross-section of the community to participate in consultation around health issues and health service planning;
2. Introduce an expression of interest process to create a register of consumers with whom to engage during health service planning;
3. Develop 'sub-regional' health groups over time to encourage an understanding of, and investment in, health service planning and delivery based on populations rather than postcodes. An initial pilot of up to three areas is recommended;
4. Develop support resources and workforce capacity to enable community engagement to be undertaken more consistently across the District.
5. Clearly differentiate engagement intended to understand patient and consumer experience, from engagement intended to plan for community level issues. This may involve the realignment of responsibility for Community Engagement between the Communications and Planning portfolios.

All members were in agreement.

8 Clinical Operations

8.1 Executive Director Clinical Operations Report

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

- Savings targets have been set and are currently being met
- Dubbo no longer have any overdue scope patients
- Wellington HSM has resigned. This is an opportune time to look at improving the sustainability of medical coverage, enhancing flows, management structure etc.
- All facilities have hospital avoidance as the directorate top priority. Interface with GPs will need further work, especially in smaller sites.

- Rural medical tender closed 6 October 2020. Correspondence has been received and responded to from various council mayors with the A/CE and Chair happy to meet with councils if requested.

9 Planning, Performance and Funding

Mr Carey, Executive Director, joined the meeting

9.1 Financial Performance Report

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

- Reporting will continue to differentiate between baseline and COVID related costs.
- September close indicates no movement in forecast at this stage.
- Operations have locked in \$4.5M in potential efficiencies.

9.2 Finance & Performance (F&P) Committee 29 September 2020 draft minutes

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

9.3 Finance & Performance Committee Chair Comments

The Chair highlighted

- Financial savings and finance sustainability plans were discussed.
- The new report format does not have a split by facility. The F&P committee are comfortable with this as any facility with issues will be highlighted. It is planned to push this report style down through the organisation.

9.4 Presentation - Sustainability Plan

A presentation was given by Mr Carey and a discussion held.

- Next 3-6 months will prioritise work such as transport and medical contracts with reporting in detail at the project level to go to the F&P committee. The focus will be on clear gains with risks to be brought to the Board's attention.
- The TOR have been agreed for a formal review looking at medical administration across all district wide systems, process, structure etc. The review will run until February 2021. Recommendations should lead to improved governance of processes and systems.

10 Quality, Clinical Safety and Nursing

10.1 Patient Story - Blayney

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

- Mr Fahy will be going out to Bourke to work with the HSM and staff re the HCCC complaint. Some broader systemic issues may be revealed.
- Virtual pharmacy review is taking a detailed look at Bourke.

10.2 Quality, Clinical Safety and Nursing Report

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

- August score card showed good results overall.
- Hospital accreditation will recommence from 29 October across Australia subject to borders opening. Detailed work continues to be done to prepare against both the national and aged care standards. Updates will be provided as they come to hand.
- Congratulations to Dubbo Base Hospital for recording 414 days without a fall.

10.3 Person Centred Care Report

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

- Satisfaction rating has increased to 81% (from 74%).
- More information is being received via the SMS survey system.
- Feedback and complaints are logged into electronic systems to allow analysis of themes, trends to improve services.

10.4 2019-20 Safety and Quality Account

Mr Fahy spoke to the Safety and Quality Account which was noted by the Board. A discussion was held.

Recommendation

The Board gave in principle endorsement of the Western NSW LHD 2019/20 Safety and Quality Account.

All members were in agreeance.

10.5 Health Care Quality Committee (HCQC) Meeting 23 September 2020 draft minutes

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

10.6 HCQC Chair Comments

Director O'Brien highlighted:

- The Quality and Safety Account
- WNSWLHD quality awards will be held 9 October 2020
- Bathurst 1000 COVID plan is in place and will include a testing station.

11 Audit and Risk

11.1 Audit & Risk Committee (ARC) Meeting 16 September 2020 draft minutes

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

11.2 ARC Representative comments

Director Bennett advised:

- Mr Bonnington highlighted key changes to the final audited 2019-20 financial statement which the Committee endorsed for signing.

12 Medical and Dental Appointments Committee (MADAAC)

12.1 MADAAC meeting held 16 September 2020 draft minutes

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

12.2 MADAAC Annual Board Report 2020

Director Treweeke spoke to the report which was noted by the Board.

12.3 MADAAC Chair Comments

Director Treweeke provided a summary of appointments made.

13 District Medical Staff Executive Council (DMSEC) Dr Liz Kennedy

13.1 DMSEC Representative Comments

Dr Kennedy gave a summary of the meeting which included:

- Discussion re CSU medical school, while MSEC members are enthusiastic there are gaps in terms of knowledge, expectations, funding etc. The curriculum is yet to be finalised. Mr Spittal advised a meeting has been organised with the LHD and CSU.
- COVID and residential aged care response
- Collaborative commissioning

The Board held a brief discussion regarding the attendance and membership of MSEC noting that current arrangements with rotating representation at Board meetings was preferred. It was agreed for Dr Kennedy to raise this at the next MSEC meeting.

Mr Spittal advised the MSCs are to be contacted by the Parliamentary Inquiry. It is anticipated this will be brought to DMSEC.

Mr Spittal advised Lachlan Health Service is on track to enroll women in the midwifery led program in Parkes. While this model does not have the full agreement with GPs in Forbes or obstetricians in Orange formal correspondence addressing concerns has not been received.

13.2 DMSEC Meeting 15 September 2020 draft minutes

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

14 General Business and Business Without Notice

14.1 Inquiry into health outcomes and access to health and hospitals in rural, regional and remote NSW

Mr Spittal spoke to the briefing which was noted by the Board and outlined the approach and preparations the LHD is, and will be taking, in regard to the Inquiry.

14.2 NSW Future Health Strategy - Engagement Sessions

Mr Carey spoke to the briefing which was noted by the Board.

The CE gave an outline of how the session with the ELT was held 6 October. The format included a presentation and questions provided by MoH along with online breakout groups. Board support would be appreciated to ensure the opportunity to put forward the strategic directions of the LHD. The engagement session for the Board is 20 October 2020.

14.3 Cowra HS Clinical Services Plan Progress Update

Mr Carey spoke to the briefing which was noted by the Board.

Mr Carey left the meeting.

14.4 WNSWLHD Board Meeting Venues 2021

The Board Chair spoke to the briefing note and advised the Board members departing in June 2021 would like to conduct site visits prior to leaving in addition to the facilities outlined for site visits in 2021.

Recommendation

[The Board endorsed the suggested venues and site visits for Board meetings for 2021 and approved the Annual Public Meeting be held in Dubbo on 3 November 2021. All members were in agreement.](#)

14.5 Dubbo Redevelopment - Critical Care Floor Preview (YouTube link)

The YouTube video was played for the Board members.

14.6 Board Meeting – 2 December

It was agreed the December Board meeting will be held in Dubbo. Dinner is to be arranged for 1 December 2020.

15 Reflection of Meeting

Discussion re some presenters reading papers rather than summarising and highlighting key points. Agreed to encourage summarising / highlighting as presenters can take their paper as read.

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

Signed:  Date: 4 November 2020