

# **Minutes**

Ordinary Meeting of the Board of the Far West Local Health District at the BHHS

Date: 28 November 2022

Time: 10.30am ACDT (11.00am AEDT)

Venue: Auditorium, Community Health Centre, Broken Hill and via Microsoft Teams

#### Members:

Mr Brad Astill Interim Chief Executive

Dr Andrew Refshauge **Board Chair Board Chair** Mr Wincen Cuy A/Prof Lilon Bandler **Board Member** Ms Mariette Curcuruto **Board Member** Mr Justin Files **Board Member** Mr Paul Kemp **Board Member Board Member** Mr Jason Masters Ms Sally Pearce **Board Member** Ms Pam Tucker **Board Member** 

In Attendance:

Ms Hannah Everuss Board, Committees and Policy Clerk (Minutes)

Meeting Opened 10.00AM ACDT/ 10.30 AM AEDT

# Item 1. Acknowledgement of Country

The Far West Local Health District acknowledges the traditional owners of the lands within its boundaries including: the Barkandji; the Muthi Muthi; the Wilyakali; the Ngiyampaa; the Wadigali; the Malyangaba; and the Wangkumara. We acknowledge and pay respects to the Elders past and present and their ancient wisdoms. We also acknowledge the communities of today and the Aboriginal community members who are part of our communities.

# Item 2. Apologies

A/Prof Michelle Dickson Board Member

#### Item 3. Disclosure of Interest

Nil to update.

# Item 4. Order of Business/Urgent Business

Nil.

# Item 5. Minutes of Ordinary Board Meeting 31 October 2022

Resolution: The Minutes of the Ordinary Board meeting held on

31 October 2022

Moved Sally Pearce, seconded Justin Files Carried.

#### Item 6. Action List

#### Action Item 22 – 17 Sustainability Ratings Health Infrastructure

**Ongoing.** FWLHD Interim Chief Executive awaiting reply from Health Infrastructure.

# Item 22 – 19 Lead Program

**Ongoing.** The Chief Executive received advice from the Director of Public Health that a response has not yet been received by FWLHD to the letter forwarded by FWLHD Board Chair regarding Lead Program funding. A meeting with Dr Kerry Chant has been scheduled for 30/11/2022 to further discuss.

## Item 22 - 22 Buronga HealthOne Official Opening

**Ongoing.** Two Rivers Health Council to receive an invitation to the Buronga HealthOne Official Opening once a date has been re-set by the Minister.

# Item 22 – 23 FWLHD Aboriginal Procurement Activity

**Complete.** An initial report is tabled in the 28 November 2022 meeting papers at Item 6.1. A report will be provided to the Board on a six monthly basis ongoing with the next report due May 2023.

#### Item 22 - 25 Invitation to join Health Council

**Complete.** An invitation to join the Two Rivers Health Council has been extended to the Story Teller through the Manager Consumer Experience, Community Engagement and Integration.

#### Action Item 22 – 28 Virtual Health – Telecommunications Contingency Planning

**Complete.** Action held over. The Safety and Quality Board Sub Committee were presented with the BHHS Virtual ICU project with FWLHD and RPA. Within this presentation it was noted the downtime procedures and contingency planning in case of a telecommunications outage. The Interim Chief Executive provided verbal update on the procedures in place.

#### Item 22 - 29 Safety and Quality Board Sub Committee Meeting Date Changes

**Complete.** The Safety and Quality Board Sub Committee meetings have been scheduled prior to the Board meeting commencing today, 28 November 2022. It was noted by the Board that this may not be possible when meetings are planned to be held remotely. In this case the Safety and Quality meetings would be held on the second Friday of the month as previously scheduled.

#### Item 6.1 Action Item 22 - 31 Financial Statements

**Complete.** The Board secretariat forwarded the final financial statements for 2021 – 2022 to the Board out of session as a circular motion. All Board Members endorsed the final financial statements for 2021- 2022 as of 1 November 2022.

## Item 6.1 Action Item 22 - 23 FWLHD Aboriginal Procurement Brief

The Board discussed that FWLHD were not engaging with local Aboriginal business' to the extent expected, noting the three small suppliers outside of the Buronga HealthOne build reported in the brief tabled. The Board expressed that within the procurement guidelines there are set requirements for Aboriginal business activity. The Board queried if there may be businesses Murrumbidgee LHD use that FWLHD may also be able to engage.

The Board discussed the approval process to become a supplier to NSW Government agencies. A complaint had been received from an Aboriginal business that the prequalification application process was complex. It was noted that the process requires forms to be completed and relevant paperwork specific to the business be attached. Once registered a business is endorsed across all of NSW government agencies.

It was suggested that the FWLHD provide education around the pre-qualification process to Aboriginal community Working Groups, Land Councils, Participation Group etc to spread the word within the community. It was noted that there is a current focus to build the capacity of such businesses in the community.

#### **Strategic Matters**

#### **Item 7 Presentation**

The Interim Chief Executive advised that the Director of Finance and Corporate Services previously Directorate titled Performance and Strategy was on sick leave and that the portfolio presentation will be held over until 12 December 2022 Board meeting.

#### **Item 8 Reflections on Our Care**

The Interim Chief Executive advised the current trained story takers were clinical staff who were currently unable to collect participant stories due to staff shortages. To rectify this a call was being put out to all staff for expressions of interest in story collection training to replenish the pool of story collectors. Training will occurred in October 2022 and a further session will be held in November 2022. Stories are to be collected confidentially and in a respectful way.

# Item 8.1 Staff Story - Tyrell

The Board noted the staff story provided and thanked the story teller noting the School Based Apprenticeship Training pathway has been highly successful for them and a great pathway from the SBAT AIN training program and then onto the Aboriginal Health Practitioner Trainee program. It was noted that South Western Sydney LHD had a successful SBAT trainee program running where two SBATs were partnered to support one another. It was requested that the contact information regarding this program be forwarded to the Director of People and Culture.

Action: Provide the Board with the number of SBATs FWLHD currently employee.

# **Item 9 KPI Reports**

#### Item 9.1 KPI Dashboard Report

The Board noted the KPI Dashboard report. Narrative was provided by the Acting Director of Clinical Operations with no significant issues noted. Nothing in particular to draw out.

The Board noted that there had been no Mental Health patients in the ED for greater than 24 hours and seclusion and restraint had been very well managed through ED recently.

#### **Item 9.2 Chief Executive Report**

The Interim Chief Executive, Brad Astill noted key points within the report.

My Emergency Doctor went live in the Broken Hill Health Service (BHHS) Emergency Department (ED) today, 28 November 2022 providing an avenue for high volume but low acuity presentations to be seen virtually. Currently it is a challenge for the community to gain a general practitioner appointment with wait times up to eight weeks. The My Emergency Doctor virtual service is staff by Specialist ED Physicians with other LHDs across the State rolling out similar services in remote locations. There is an opportunity to roll this service out in remote sites throughout the District.

NSW Health is looking to implement urgent care services with an expression of interest circulated to LHDs in an aim to reduce demand on EDs by providing a GP type service to remote locations, there is currently no set model. FWLHD would support a link to a GP provider virtually. The FWLHD is continuing discussions with the Western Primary Health Network who are keen to partner with the LHD. There may be some bigger centres that have a capacity to provide a virtual link.

The Board queried how this model would work. It was noted that such a service would operate as an arm of the FWLHD. FWLHD would provide support for the service, guiding patients to the room, helping to set up the virtual link and providing technical services.

Four capital projects are being undertaken across the District with Health infrastructure completing community consultation. Both the general community and Aboriginal community are being consulted with all projects progressing well.

The Philanthropy Coordinator is working closely within a team interviewing existing childcare providers in Broken Hill to evaluate their expansion interests, advising of available clientele that the Broken Hill Health Service could provide. Discussions with providers have been reported to be fairly positive. If childcare could be secured it is reported that a significant number of clinical staff could return to work helping to ease the staffing burden in Broken Hill. The Board queried if childcare can be provided twenty four hours to support shift workers. The Interim Chief Executive advised that there is potential for extended hours of care.

The quarterly meeting with the Ministry was attended by the Interim Chief Executive who were complimentary of the FWLHD Patient Safety and Quality service. Discussions regarding a virtual rehab model and a haemodialysis program for Wilcannia.

The continuing challenge for the FWLHD is staffing. The BHHS is currently under staffed to the equivalent of 50 full time employees. The Board queried what the point the facility becomes unsafe. The Interim Chief Executive advised that BHHS have not reached that point as of yet with staff doing a wonderful job of keeping the service going with strategies being put in place to mitigate risk. Rural incentives are being applied, retention bonuses are being offered to ICU, ED and Theatre staff. Unfortunately the shortage of the nursing workforce is an Australia wide issue.

Action: The Board to receive a report in May 2023 regarding the implementation of 'My Emergency Doctor'.

Resolution: The Chief Executive Report be received and noted.

Moved Jason Masters, seconded Sally Pearce. Carried.

# **Matters for Decision**

# **Item 10 Reports for Endorsement**

# Item 10.1 BHHS Sub-Acute Adult Proposed Rehabilitation Service Model

The Board discussed the service model. It was noted that this was presented to the Board in September 2022 however was not endorsed at this time. The Board agreed to endorse the BHHS Sub-Acute Proposed Rehabilitation Service model.

**Resolution:** The FWLHD Board endorsed the BHHS Sub-Acute Proposed Rehabilitation

Service Model.

Moved Pam Tucker, seconded Mariette Curcuruto. Carried.

# **Item 11 Reports for Noting**

#### Item 11.1 MoH KPI Board Report - April to June 2022.

The Board noted the report.

# Item 11.2 FWLHD Board and Executive Leadership Team – SLA Priorities Planning Workshop

The Board and Executive leadership team participated in a workshop to identify the agreed priorities for the FWLHD Ministry Procurement Roadshow to be held in February 2023.

# **Matters for Discussion**

Item 12. Aboriginal Health

Item 12.1 Clinical Services

Item 12.1.1 Comparative Discharged Against Medical Advice Rates

**Item 12.1.2 Comparative Did Not Wait Rates** 

#### Item 12.1.3 Admission rates compared with population numbers

The Board noted 12.1.1 Comparative DAMA rates, Comparative DNW rates and Admission rates compared with population numbers reports.

It was suggested by a Member of the Board that the St Vincent's model of DNW for Aboriginal patients could work well with My Emergency Doctor implementation at BHHS. The Board discussed the implementation of such a strategy with some members advising that prioritising Aboriginal patients could cause social impacts if the population became emotionally charged and blame the Aboriginal community because of service provider decisions to address the gap. The FWLHD were urged by the Board Members to consult with the Aboriginal community regarding their view on the implementation of such a strategy.

The Board discussed the need for healthcare workers to reflect on practice. Cultural awareness requires work with every person who has interaction with the frontline of patients who present to the organisation. There is work to be done by non-indigenous people regarding their thinking and what reflection they do on their own practice.

#### Item 12.2 Workforce

# **Item 12.2.1 Workforce Participation Rates**

The Board noted the Workforce Participation Rates report.

#### Item 12.3 External Relationships

# Item 12.3.1 Community Engagement Quarterly Report (due Feb, May, Aug, Nov)

The Board noted the Community Engagement Quarterly Report.

#### Item 12.3.2 Maari Ma and Coomealla Health

The Interim Chief Executive advised that the funding agreement with Maari Ma has been signed. Maari Ma and FWLHD are continuing discussion on how they can work together.

# Item 13. Sustainability

Nil.

# **Item 14 Board Sub Committee Reports**

Item 14.1 Safety and Quality Board Sub Committee Meeting

Item 14.1.2 Safety and Quality Committee Chair Summary Report

Item 14.1.3 Patient Safety and Clinical Quality Report

Key points of the October report (September data) were:

#### What's working well within the District:

- Pressure Injury Prevention remains high
- Falls have significantly reduced from previous month
- Majority of SAER's have been completed 2 on track for completion

## What's not working so well – concerns in the District:

- Hospital acquired complications remain above KPI
- VTE risk assessment completion within 24 hours of admission remains below target although has had slight improvement

The A/Committee Chair explained that endocrine and cardiac hospital acquired complications remain above KPI with a meeting being held to discuss strategies for improvement. The Interim Chief Executive confirmed that an endocrine pathway was in development to address hospital acquired hypoglycaemia. The effective implementation of this is being hindered by the rotation of the Junior Medical Officers. The nursing staff are being asked to champion the new pathway by encouraging doctors to ensure Dextrose is hung prior to surgeries when patients have been fasting for long periods.

The Board discussed upgrading of SAER incident ratings to use as a learning tool for staff. Clinical improvement comes from an examination of incidences.

It was reported that the CEC are no longer required to oversee and assist SAERs. It was noted Hospital Acquired Complications, haven't seen improvement. The FWLHD are working to change the behaviour to achieve the improved result.

The Board endorsed the Patient Safety and Clinical Quality October 2022 Report.

Resolution: The Safety and Quality reports be received and noted.

Moved Jason Masters, Seconded Lilon Bandler. Carried.

# Item 14.1.3 Quality and Safety Committee Minutes 14 October 2022

Noted.

#### Item 14.2 Finance, Performance and Workforce

# Item 14.2.1 Finance, Performance and Workforce Committee Chair Report

The Board noted the report.

The Chair of the Finance, Performance and Workforce Committee Chair advised that the committee have been discussing the finance reporting template for review.

#### Item 14.2.2 Finance, Performance and Workforce Committee Minutes

The Board noted the 24 October 2022 minutes.

# Item 14.2.3 Finance Report October 2022

Ms Apsara Kahawita, Director Performance and Strategy, attended the meeting and provided key points of the Finance report for October 2022.

The LHD reported total expenses of \$46.8M for the four months ending October 2022. This represents 33% of the full year budget. Year to date Expenses result at October 2022 is \$0.42M unfavorable to the budget. Excluding COVID-19 expenses of \$0.83M YTD, October results will be favorable by \$0.40M in expenses.

The LHD reported total revenue of \$4.0M for the four months ending October 2022. This represents 28% of the full year budget.

Own Source Revenue year to date result at October 2022 is \$0.91M unfavorable to the budget. The District is expected to yield financial benefits through process improvements from the "Revenue Partnering project action plan" but the estimated benefit is unknown at this stage.

The full year forecast for Expenses is \$1.03M unfavorable to the budget assuming that the COVID -19 expenses cannot not be reimbursed from the Ministry of Health. The District may be expected to absorb COVID expenses if the expenses are favorable with lower activity levels compared to the target. The full year forecast for COVID expenses has been reduced to \$2.05M based on October monthly expenses.

The full year forecast for Own Source Revenue is \$2.52M (17%) unfavorable. The initial budget allocation for FWLHD is \$14.4M for FY 2022-23, representing an increase of \$0.3M (2.01%) compared to the annualised budget. The District has been notified that there is no volume component allocated in the 2022-23 revenue budget.

Financial performance of the LHD is challenged by premium labour cost due to skill shortages and labour market tightness, additional expenses to reduce OPD clinic wait lists, excessive annual leave liability, increase of energy prices, COVID expenses and difficulty in achieving the revenue target.

# Item 14.2.4 Workforce – Risk Management Report – October 2022

The Board noted the report.

# Item 14.2.5 Finance, Performance and Workforce TORs October 2022 – for endorsement

The Board endorsed the Finance, Performance and Workforce Board Sub Committee Terms of Reference reviewed by the Committee on 24 October 2022.

## Item 14.3 Audit and Risk

# Item 14.3.1 Audit and Risk Committee Chair Summary Report

Nil.

## Item 14.3.2 Audit and Risk Ordinary Committee Meeting Minutes

Nil.

#### Item 14.3.3 Risk Management Unit - Work Health and Safety Report

Nil.

It was noted that no Audit and Risk Committee meeting had been held since the last Board meeting and therefore no reports to be tabled.

#### Item 15. Business on Notice

Nil.

#### Item 16. Calendar of Events

#### Item 16.1 Calendar of Events 2022

The Board noted the 2022 calendar of events and annual reporting schedule for 2023.

The Board requested the Calendar of Events for 2023 be circulated out of session by the Secretariat.

# Item 17. Correspondence

#### Item 17.1 Letter of Condolence to Maaria Ma

#### Item 17.2 Letter of Condolence to the O'Donnell Family

The Board noted the condolence letters forwarded to Maari Ma and the O'Donnell family.

# Item 18. Other Business

Nil.

# **Meeting Finalisation**

# Item 20. Next Meeting

Monday 12 December 2022

# **Meeting Close**

2.32pm ACDT/ 3.02pm AEDT

# Certified as a correct record.

Andrew Refshauge

Name

Signature

12 December 2022

Date