

Western NSW Local Health District
Western NSW LHD Board Meeting August 2018
Dunedoo MPS
Wednesday 01 August 2018, 09:30 AM —04:00 PM AEST

HSM, Christine Warwicker welcomed the Board and gave a presentation regarding the facility prior to a site tour being conducted.

WELCOME/ACKNOWLEDGEMENT OF COUNTRY

The meeting commenced at 10.15am with the Chair providing an Acknowledgement of Country.

Dr Warren Kealy-Bateman (MSEC) was introduced to the Board and gave an outline of his background and mental health services. The impact of the drought throughout the LHD was discussed.

Attendance of Members

Scott Griffiths (Chair), Dr Joe Canalese, Darren Ah See, Fiona Bennett, Jason Cooke, Julie Ann Maher, Paul Mann, Amanda O'Brien, Joan Treweeke.

In Attendance

Scott McLachlan, Chief Executive; Mark Spittal, Executive Director Operations; Josh Carey, Executive Director Finance, Dr Warren Kealy-Bateman, District Medical Staff Executive Council.
Lauren Nott, Secretariat.

Item 1 Apologies

Dr Colin McClintock

Item 2 Conflicts of Interest

Paul Mann will be acting GM Walgett Shire Council for 2 months

Item 3 Minutes of Board meeting held 4 July 2018

Minutes of the meeting 4 July 2018 were endorsed as a true and accurate record.

Moved: Director Bennett

Seconded: Director Mann

Item 4 Action Register from meeting held 4 July 2018

Progress on action items was noted by the Board

Item 5 Chair Report – Board Chair, Scott Griffiths

The Board Chair reported that Dr Crisp contacted the Chair re paediatrics in Orange. The CE advised that ongoing work is underway to assist with this demand. The PHN in Dubbo has implemented a strategy looking at referral pathways and is working to extend this model to Orange. Director Treweeke spoke of alternate services offered by Royal Far West (interest declared) for vulnerable children. The CE also spoke on Karitane and Tresillian moving into the LHD. The Chair has been contacted by the Minister's office in relation to the next round of Board appointments which is progressing.

Item 6 Chief Executive Report - Scott McLachlan

In addition to the written report, the Chief Executive reported:

- Updated performed scorecard received from MoH – the LHD is performing well.
- The Minister for Health was in Bourke for the last two days re Maranguka (Justice Reinvestment) Project which is being trialed in Bourke. The Minister also launched the new Men's Space project.

- Mr Spittal outlined his recent time in Bourke with the HSM and the Aboriginal Liaison Officer.
- A parliamentary inquiry has been launched into the NDIS. The MoH has raised a number of issues with the Commonwealth. Rural CEs have also discussed the role of LHDs as NDIS providers and are looking at implications, business models etc.

6.1 Monthly Performance Scorecard

In addition to the written report which was noted, the Board were advised:

- Presentations in ED >24 hours – Mr Spittal advised of pressure points in Orange and Dubbo. Issues include transfers out and data issues. Dubbo G ward is operating at 96% capacity. Dr Kealy-Bateman advised mental health patients moving at night contributes to this issue. Discussions continue in this area.
- Follow up for Aboriginal people after 48 hours – the change process discussed at the last Board meeting continue to be implemented.

6.2 NSW Health League Table May 2018

The report was noted by the Board.

6.3 Health Promotions Team Day agenda

The agenda was noted by the Board and the CE gave further information about the programs. A report will come to the Board every six months to provide updates. Health Councils can be involved/supported in many of these areas.

6.4 People Matter Survey – Comparison rates

The written report was noted by the Board.

Item 7 Clinical Operations – Executive Director Operations, Mark Spittal

7.1 Executive Director Clinical Operations Report

In addition to the written report which was noted, the Board were advised:

- Engagement of PwC at Bathurst re surgery/theatre processes has been extended while GM recruitment continues.
- Dubbo Renal – HI and MoH have acknowledged situation going forward and additional renal chairs will now be included in redevelopment.
- Patient flow unit role and focus into the future was highlighted. This was discussed in further detail. Budget increase includes moving to 24/7 model.
- GM Bathurst recruitment – first round interviews have been held. Interviews for those short listed will be held next week.
- Virtual Hospital – the CE outlined the workshop held three months ago to vision Virtual Health Service. Work continues in this area. The strategy will bring together a number of pieces of work currently underway including PFU.
- DMS Bathurst – interviews have been held.

Item 8 Finance and Performance – Executive Director Finance Josh Carey

8.1 Executive Director Finance Report

In addition to the written report the Board were advised revenue targets have been adjusted.

2018/19 Budget Allocation

J Carey spoke to the briefing document which was supported by the Finance & Performance Committee at their last meeting.

MoH sent revised service agreement on 30 July 2108 with final adjustments.

Work has commenced on approach to 2019/20.

A discussion was held re focus for ELT and Operations going forward.

Recommendation:

The Board approved the Chief Executive and Board Chair sign the revised 2018/19 Service agreement and the letter of response to Ms Susan Pearce.

Moved: Director Mann

Seconded: Director Treweeke, All in favour

Dr Kealy-Bateman spoke about the high level of awareness of the Board of social determinants and inter-connectiveness of working together.

8.2 Finance & Performance Committee Draft Minutes – 24 July 2018

The minutes from the meeting of the Finance and Performance Committee were received by the Board.

8.3 Finance & Performance Committee Chair Comments

Chair advised there were no further comments to be made.

Item 9 Quality and Safety

Executive Director, Quality and Safety, Ms Di Wykes joined the meeting

9.1 Executive Director Quality and Safety Report

The information was noted by the Board. Changes to National Standards was discussed. An action plan is being prepared for the implementation of the new standards. Preparation work have commenced.

9.2 CEC Review – Implementation Plan and Communications Plan

The information was noted by the Board. Ms Wykes spoke to the documents. The action plan will have an integrated implementation with other work underway such as new national standards.

CE advised dialogue has started with the District Medical Staff Executive Council. The review recommendations were distributed and an invitation extended to the MSEC to attend the next District Clinical Council meeting.

Director O'Brien acknowledged that while the 12 month implementation plan is optimistic it is an important body of work. HCQC will be reporting to Board as progress is made and will keep a close watch to ensure this is done in time.

Recommendation:

The Board noted and endorsed the response to the Review of Governance of Quality and Safety and endorsed the high level Action Plan

Moved: Director Canalese

Seconded: Director O'Brien All in favour

9.3 Health Care Quality Committee Draft Minutes - 25 July 2018

The draft minutes of the Health Care Quality Committee were received by the Board.

9.4 Health Care Quality Committee Chair Comments

- Director O'Brien commented on the on-line self-assessment for the Living Quality and Safety plan. Ms Wykes provided further information re engagement across the District.

- Overdue RCA recommendations – a trend report has been requested. Ms Wykes spoke on the review of RCAs which have reduced to 60 from 91. Actions included dedicated resources to facilities, implementing scoring of recommendations to ensure strength and robustness.
- Conversations continue with C Marr re coordinating a Chairs of HCQC forum. A teleconference will be held 8 August.
- CEC have produced a book on quality and safety for Boards which is hoped to be available in the near future.
- Consumer representative Ms J McRae has resigned due to a conflict of interest regarding her partner.

Executive Director, Quality and Safety, Ms Di Wykes left the meeting

Item 10 Medical and Dental Appointments

10.1 Medical and Dental Appointments Advisory Council meeting draft minutes 5 July 2018 and 18 July 2018

The minutes from the meetings of the MADAAC were received by the Board.

10.2 Medical and Dental Appointments Advisory Council Chair comments

Extra meetings are being held to meet the demands of quinquennial appointments. DMSs have been asked to improve processes for assessments. Improvements in DMS assessments and in self-assessments are being seen.

Item 11 Audit and Risk

11.1 Audit and Risk Management Committee meeting Draft minutes – 13 July 2018

The draft minutes of the Audit and Risk Management Committee were received by the Board.

11.2 Committee member comments.

Information provided for the teleconference held 13 July 2018 was thorough and committee felt comfortable with the quality of work.
Director Treweeke advised A&R staff have created an in house program to assist with analytics of data. VMO payments and claims was first issue raised. This will be able to be used for other auditing processes.

Action:

The Brief - Entry into Data Analytics by Internal Audit is to be sent to members for their information.

Action by: L Nott Due: ASAP

The Board congratulated Mr Bennett and his team on the work undertaken
The CE advised Leah Fricke is progressing through registration process required for her to potentially take over as Chair of Audit and Risk when Mr Moffitt retires.

11.3 Corporate Governance Attestation Statement

The CE spoke to the brief. Following a brief discussion the Board moved the following:

Recommendations:

1. The Board noted the review and the contents of the Attestation Statement, noting the qualifications relating to the unfavourable net cost of service for the 2018 financial year.

2. The Board supported the Chair of the Board and Chief Executive signing the 2018 Corporate Governance Attestation Statement.

Moved: Director Treweeke Seconded Director Mann All members were in favour.

Item 12 General Business & Business Without Notice

12.1 Medical Imaging Plan

Mr James Harvey, A/General Manager Imaging Services and Ms Anne Lea, Manager Planning & Service Development joined the meeting.

Mr Harvey spoke to the plan and gave a presentation.

A discussion was held.

Recommendation:

The Board gave in principal endorsement of the Western NSW LHD Medical Imaging Service Plan 2018-2022.

Moved: Director Canalese Seconded Director Maher All members were in favour.

Mr James Harvey, A/General Manager Imaging Services left the meeting

12.2 Cowra Health Service – Clinical Service Plan

The CE gave an introduction and background to the work undertaken.

Ms Lea spoke to the brief and gave a presentation (see papers). A discussion was held.

The Board congratulated Ms Lea and her team on the work undertaken.

Recommendation:

The Board endorsed the Cowra Health Service – Clinical Service Plan and approved Ms Lea submit the plan to the Ministry.

Moved: Director Maher Seconded Director Treweeke All members were in favour.

Ms Anne Lea, Manager Planning & Service Development left the meeting

12.3 Asset Strategic Plan

The CE spoke to the brief. The draft 2018 ASP document was submitted to the Ministry following Board and Finance and Performance Committee endorsement. This final version is prepared for the Board's endorsement and submission to the Ministry of Health.

The CE read from a letter received yesterday from the Capital Strategy Group. Options were discussed. The CE is to speak further with Ms Cathryn Cox (Strategy and Resources Division, MoH) and will come back next month with further information.

Recommendation

The Board endorsed the final 2018 ASP document including the zonal master plans for Cowra and Blayney and the 2018 top five priority projects for capital investments as outlined in the brief.

Moved: Director Canalese Seconded Director Cooke All members were in agreement

12.4 Rural Medical Models Project

Dr Clayton Spencer, Executive Director Medical Services joined the meeting

The CE introduced Dr Spencer and gave a brief background of the work undertaken. Dr Spencer spoke to the brief and discussion paper and gave a presentation (see papers).

The proposed model for Wellington was outlined and a discussion held. Questions were raised re costings, and a GP reference panel to provide advice. The Chair advised there is now a GP Medical Staff Council. The Rural CEs have been discussing the role of the LHDs in employing GPs and have asked the RDN to prepare a body of work around this issue. The CE advised the National Rural Health Commissioner has pulled together a reference group to look at a national model.

It was agreed for Dr Spencer to come back to the Board with a further update later in the year and present a case study on Wellington.

Recommendation:

The Board noted the ongoing progress made in regard to the Rural Medical Models Project and the many alternative models that have been strengthened or established over the last four years within Western NSW LHD.

Dr Clayton Spencer, Executive Director Medical Services left the meeting

12.5 Healthy Ageing Strategy 2017-2020

Ms Julie Cooper, Executive Director Integrated Care joined the meeting

Ms Cooper spoke to the brief and paper and gave a presentation (see papers). A discussion was held.

Recommendation:

The Board noted the progress of the Healthy Ageing Strategy.

Moved: Director Maher Seconded Director Treweek All members were in agreement

Ms Julie Cooper, Executive Director Integrated Care left the meeting

12.6 Living Well together Update

The paper was noted by the Board.

The LHD is working with the statewide interpreter service re support available. A pilot project is planned for Lightning Ridge. Executive Director Allied Health has been working in this area for emergency and surgical services. There is a body of people with low literacy levels who should be included in 48 hour follow up programs.

Director O'Brien advised this report was discussed at HCQC.

Mr Spittal advised he has asked all GPs to put a focus on driving patient experience. There is a need to ensure other team members are involved and there is not a reliance on nurses. A significant rise for September data is anticipated.

12.7 2018 Template Board Training and assessment activities

Ms Nott spoke to the papers and requested all members provide the information requested by 24/08/18 for submission to the MoH.

Actions:

The 2018 Template Board Training and assessment activities template is to be sent to members for their completion.

Action by: *L Nott* Due: *ASAP*

The 2018 Template Board Training and assessment activities template is to be completed by members and sent to L Nott for collation/submission.

Action by: *All Directors* Due: *24 August 2018*

Item 13 Closed session: Chief Executive Performance Review

Mr McLachlan, Mr Spittal, Mr Carey and Ms Nott left the meeting for the duration of the closed session.

Item 14 General Business

Palliative Care Orange –The CE advised an announcement was made yesterday. An EOI is to go out by end of the week for two months. The CE has had discussions with MoH regarding funding into the future. No decision will be made until EOI is finalised.

Item 15 Reflection of Meeting

Presentations were well received and updates appreciated.

There being no further business the meeting closed at 4.15pm.

Signed:  Date: 05 September 2018