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The Chair opened the meeting and acknowledged the Traditional Owners of this Land. He also paid his respects to the Elders both past and present. He extended his respect to other Aboriginal people and colleagues present today.

1. **In-camera Session**

An in-camera session was not required.

2.1 PRESENT AND APOLOGIES:

Board Members Via Teleconference/Skype:

Dr Brian Pezzutti, Mr Mark Humphries, Mr Peter Carter, Mr Michael Carter, Ms Carolyn Byrne. Dr John Griffin, Dr Allan Tyson, Ms Deb Monaghan, Ms Naree Hancock, Dr John Moran, Mr Pat Grier

Via Teleconference:

Professor Susan Nancarrow

In Attendance:

Mr Wayne Jones, Chief Executive, Mr Ged May, Community Engagement Manager Ms Jennifer Cleaver, Manager Chief Executive Office Ms Kate Greenwood, Secretariat Mr Brett Skinner, Director Finance (part of meeting) Dr David Hutton, Director Clinical Governance (part of meeting)

Apologies:

Dr Alasdair Arthur

Declaration of Pecuniary and/or Conflicts of Interest

No new declarations of Pecuniary and/or Conflicts of Interest were declared.

2.3 Previous Minutes:

2.3.1 The Minutes of the Board Meeting held on 27 May 2020 as circulated were ENDORSED as a true and accurate copy.

Moved:

Mr Mark Humphries

Seconded: Ms Carolyn Byrne

CARRIED

The Board viewed a recently aired media clip on the recovered COVID-19 patient from LBH ICU.

The Board also viewed a short clip from the Chief Executive designed for the NNSW LHD Orientation Program for new staff members.

2.3.2 **Business Arising from the Minutes:**

2.3.2.1 Mr Jones is to request Mr Brett Skinner, Director Finance to share his financial visionary overview for the NNSW LHD to the 24 June 2020 Board meeting. Mr Skinner spoke briefly on the PowerPoint presentation on End of Financial Year forecast

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results and Interim Budget Issues FY 2020/21.

Mr Skinner spoke on the importance of publishing a balanced budget every year. However at the beginning of the year, the LHD advised the MOH of a potential \$17M unfavourability year ending June 2020. Activity in the first six months was business as usual, when February 2020 saw the COVID-19 impact occur. However, recent supplementations from the MOH have assisted to improve the projected end of year forecast.

NNSW LHD continues to capture the costs associated with COVID-19 management as this will be closely monitored by NSW Health and the Federal Government.

Mr Skinner gave an overview of the 2019/20 Expense Variations advising that premium labour costs continue to have an impact on the budget.

A lengthy discussion ensued around the importance of supply and monitoring of personal protective equipment across the LHD and best practice around PPE use in various clinical settings.

Mr Jones reported on a recent contact with a company to look at IT Procurement Tracking Systems.

Mr Jones spoke to changes that IHPA (Independent Hospital Pricing Authority) had made and the impact to NWUA's and noted this advice was included in recent F&P committee meeting papers. The Chair suggested an invitation is extended to Mr Daniel Hunter. Chief Financial Officer NSW Health to attend to discuss the implications on NWUA changes with the Board.

Mr Skinner advised an interim Service Agreement and interim Budget will be rolled out to cover July – December 2020 with a final budget expected in November 2020. At this stage, it is unsure if any consideration of New Build will occur in the interim or final Service Agreement. Funds for elective Surgery catch up will be in addition to the Service Agreement primarily through the Private Sector. Mr Jones advised he has requested an explanation on the terminology "net neutrality" in the National Health Agreement regarding private revenue and will report back through the CE report.

The Board thanked Mr Skinner and the LHD Finance team for their excellent work during these very challenging times.

2.3.2.2 Mr Jones to organise a register of models of care changes as a result of COVID-19 in delivering healthcare and report back to the 28 October 2020 Board Meeting.

The Board noted this will be provided to the 28 October 2020 Board meeting.

ACTION:

Mr Jones to organise a register of models of care changes as a result of COVID-19 in delivering healthcare and report back to the 28 October 2020 Board Meeting.

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2.3.2.3 Mr Jones is to submit a brief with a proposed outline of a further workshop that addresses issues of governance that were identified at the Symposium and taking into account the work it had undertaken with The Nous Group in 2018 and 2019 to the 24 June 2020 Board meeting.

Following a brief discussion, it was agreed Mr Jones would organise a face-to-face workshop to be facilitated by The Nous Group to be held on a date to be determined in late August 2020.

ACTION:

Mr Jones to organise a face-to-face Board Governance workshop to be facilitated by The Nous Group to be held in late August 2020.

2.3.2.4 Mr Jones to request Ms Fiona Baker, Media Manager to submit the letter of thanks to Ministry of Health Media Unit and Mr Ged May, Community Engagement Manager to submit to future CAG and CPAC meetings.

The Board noted the letter of thanks was submitted to recent CAG and CPAC meetings.

2.3.2.5 Mr Jones to request Dr David Hutton, Director Clinical Governance to attend and discuss the results around hospital acquired complications in the NNSW LHD Board report October- November 2019 to the 24 June 2020 Board meeting.

Dr Hutton spoke to the information in the brief referring to the data in the NNSW LHD Board report October-November 2019. He explained the process involved in understanding a funnel plot, which is used to report variations, particularly between sites of different size / activity.

Dr Hutton advised issues with data quality result in over-reporting of HAC may be due to the condition being present on admission or the clinical criteria for diagnosis not being met. He indicated that there is work underway to improve the data quality. However, trending of overall HAC's over time is showing the rates are falling which is partly due to improvement in data quality and clinical procedures.

General discussion followed on the information in the report with Dr Hutton clarifying several queries around the graphs in the report.

Responding to a query, Dr Hutton outlined the process involved in collecting, distributing and reviewing the data.

The Board thanked Dr Hutton for his comprehensive report, noting the information is of great value to the Board.

2.3.2.6 Mr Jones to request Mr Matthew Long, Director of Corporate Services to provide a brief on the average costs of equipment leases across the NNSW LHD to the 29 July 2020 Board meeting.

The Board noted this will be provided to the 29 July 2020 Board meeting.

ACTION:

Mr Jones to request Mr Matthew Long, Director of Corporate Services to provide a

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brief on the average costs of equipment leases across the NNSW LHD to the 29 July 2020 Board meeting.

2.3.3 Other Matters Arising from the Minutes

- The Chair requested Mr Jones to enquire as to whether NSW Pathology could notify General Practitioner's if there is changes to antibiotic sensitivities amongst community acquired infections.
- Mr Jones advised he will raise with the relevant parties the query around sustainability issues associated with the development of the Tweed Valley Hospital by a Project User Group. Mr Peter Carter indicated that he will take this feedback to the sustainability working group also.

Matters for Decision

3.1 Review of NNSW LHD Top 10 Strategic Risks

Dr Hutton spoke on the quarterly review of NNSW LHD Top 10 Risks giving an overview of how the risks have been reviewed and determined. The quarterly Key Risk Indicator Report (KRI) was revised to include financial risk matters related to COVID-19.

General discussion followed around the Top 10 risks with Dr Hutton outlining some changes in the risk identification report and the reason for this.

Following discussion around Risk 5 Aggressive Behaviour and the Safety Culture Programme established in 2018, Mr Jones advised management is ensuring all NNSW LHD staff are aware that if they are victims of violence in the workplace, it is to be reported to line-managers and the NSW Police accordingly.

In relation to the recent national cyber-attack, Mr Jones advised the e-Health Steering Committee monitors cyber security across NNSW LHD very closely.

During discussion regarding Risk 9 Health Outcomes of Aboriginal people, Mr Jones advised that work is underway to improve Cultural Awareness Training within the LHD. Mr Jones advised he will follow-up with Ms Kirsty Glanville, Associate Director Aboriginal Services to propose some options for Aboriginal cultural education for the Board and he will provide this through his CE report.

Mr Jones spoke briefly on the People Matter Employee Survey indicating that work is underway to develop strategies to engage staff further. However, some of the work has been deferred due to COVID-19 and will be reviewed in the next several months.

The Board ENDORSED the NNSW LHD Top 10 Strategic Risks.

4. Chairman's Update

4.1 Chairman's Calendar

The Board noted the Chairman's Calendar.

It was noted the Chairs tenure will be finished at the end of 2020. Mr Jones indicated he will enquire with the MOH on where the process is at regarding calls for nominations.

5. Matters for Discussion

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5.1 Chief Executive's Report

Mr Jones referred to the issues that were covered in the Chief Executive's Report including:

5.1.1 Current and Significant Issues

- Clinician Engagement
- Coronavirus
 - Intensive Care capacity
 - Private Sector Viability Guarantee has been finalised with all parties.
 - Staff/Community communications to provide factual information
 - Respiratory Clinics an additional fixed site Respiratory Clinic has been established at Casino as well as a mobile testing unit in partnership with Bulgarr Ngaru to ensure COVID testing capacity is made available in smaller outreach communities.
 - Elective Surgery NNSW LHD is on track to achieve 75% by end of June 2020.
 The recent announcement of \$388M to reduce elective surgery numbers is tied to private sector use. Surgical Recovery Plans have been developed and submitted to the MOH for consideration of financial implications. Mr Jones will provide an update on the progress of the surgical recovery plan to the 29 July 2020 Board meeting through his CE report.
 - Personal Protective Equipment Governance Committee
 - Free Car Parking LHD has expressed their concern, however Lismore City Council continue to charge for parking around majority of streets in LBH precinct.

5.1.2 Update on Strategic Issues

- Our Community Values Our Excellent Person-Centred Care
- Integration Through Partnerships Department of Regional NSW established in April 2020 and is the Governments central agency for regional issues.

5.1.3 Matters for Approval

Nil for this meeting

5.1.4 Major Key Performance Indicators

- Emergency Treatment Performance (ETP) during May 2020 was 78% against the target of 81%.
- Elective Surgery Access Performance during May 2020, NNSW LHD did not meet the Category 2 and 3 targets. The results were as follows: Category 1 was 100% against a target of 100%, Category 2 was 80% against a target of 97% and Category 3 was 75% against a target of 97%.
- NNSW LHD met all triage targets with all triage categories equal to or greater than the May 2019 results.
- Transfer of Care result for May 2020 was 90% against a target of 94%.

5.1.5 Security, Risk and Compliance Update

Nil for this meeting

5.1.6 Governance Update

Board Sub-committee – Clinical Planning and Engagement Committee held inaugural

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meeting on 23 June 2020. Mr Jones advised it was well attended.

5.1.7 Capital Works/Planning Projects

- Tweed Valley Hospital a productive value management workshop was held on 18 June 2020 with clinicians, LHD management/executive, MOH and Health Infrastructure staff. The clear priorities included radiation oncology, PET CT and a learning development hub. Mr Jones advised that to provide funding to support more of the Option 3 requests, options to lease major equipment would be explored and considered at a further value management workshop scheduled for two weeks time.
- Lismore Base Hospital tenders for completion of the refurbishment work are progressing well.
- Ambulatory Care Unit the proposed date for handover and occupancy remains mid July 2020. There has been recent media attention regarding the Government commitment to redevelop the Grafton Base Hospital. It was noted Grafton Chamber of Commerce and other groups are making representation to the Member for Clarence and NSW Premier to fund the redevelopment of GBH. Following discussion around the development of the GBH Clinical Services Plan, Dr Moran proposed the following motion which was unanimously ENDORSED:

The Chief Executive is to explore opportunities to commence progression of the GBH Clinical Services Plan with the inclusion of a secure unit within this financial year.

5.1.8 Matters for Noting

- Hospital Visitation State Pandemic Committee have amended the visitation policy to allow 2 support people for each birthing mother.
- Face to Face Education NNSW LHD is reviewing our position on face-to-face education and training programs and will release advice in coming weeks in relation to physical distancing practices to allow recommencement of such gatherings.
- Surgery Dashboard query Mr Jones clarified a Surgery Dashboard query regarding patients not being transferred to theatre in less than 15 minutes

5.1.9 Important Meetings/ Diary Commitments

 All meetings/events across NNSW LHD are being critically reviewed with the view of cancelling/ postponing or reverting to video-conferencing to support the implementation of the social distancing principles.

5.1.10 Questions for the Chief Executive without Notice

- Discussion followed around the recurrent costs of the Tweed Valley Hospital.
 Mr Jones explained this will need to be monitored and managed by the LHD and the MOH on completion of the new hospital in 2023.
- Mr Jones indicated discussions are underway for recruiting a Vascular Surgeon next year with the view of extending this to the Tweed Valley Hospital.
- Mr Jones gave a brief overview of the Human Factors Program.

The Board **ENDORSED** the Chief Executive's Report.

5.2 Committee Minutes (discussed on exception basis, otherwise noted)

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5.2.1 Health Care Quality and Research Committee (HCQRC) – 9 June 2020.

Ms Byrne gave a brief overview of the HCQRC meeting advising the LHD has 20.8 FTE clinical coders with 6.67 being backfilled with agency coders. Disparity with Queensland remuneration rates continue to be of concern.

Ms Byrne advised that the HCQRC Terms of Reference list the committees that report to the HCQRC and the process of mapping the LHD committee structure is still underway.

The Board noted the unconfirmed HCQRC minutes.

5.2.2 Finance and Performance Committee (F&PC) – 17 June 2020.

Mr Humphries gave a brief overview of the unconfirmed F&PC minutes.

YTD \$2.2M favourable, which was supplemented by \$2.4M from the MOH for COVID-19 management.

Whilst there has been decreased activity across the LHD, expenses continue to increase due to COVID-19 related preparations. Mr Jones gave a brief overview on the areas of decreased activity. Responding to a query, Mr Jones advised domestic violence is continuing to rise and the LHD has increased its support staff for this.

Mr Jones indicated Telehealth across the district has increased significantly and will provide an update to the Board in due course.

Mr Humphries acknowledged the continued dedicated commitment of Mr Skinner, Director of Finance and Mr Peter Clark, Accountant Management and the finance team.

The Board noted the unconfirmed F&PC meeting minutes.

5.2.3 Medical and Dental Appointments Advisory (MDAAC) Committee – 11 June 2020 Dr Tyson spoke to the MDAAC minutes providing a brief overview of the meeting.

Dr Tyson referred to the recent appointments and resignations across the LHD.

The Board noted the unconfirmed the MDAAC minutes.

5.2.4 Audit and Risk Committee (ARC) -3 June 2020.

The Board noted the ARC minutes will be provided to the 29 July 2020 Board meeting.

5.2.5 Clinical Planning and Clinician Engagement – 23 June 2020.

The Board noted the Clinical Planning and Clinician Engagement minutes will be submitted to the 29 July 2020 Board meeting.

5.2.6 Community Partnership Advisory Council (CPAC) –15 June 2020.

Mr May gave a brief update on the CPAC meeting.

The Board noted the letter from Mr Ron Hoffman, Murwillumbah CAG Chair to Mr Mark

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Coulton, Minister for Regional Health, Regional Communication and Local Government regarding the recent decision on the rurality change to the Murwillumbah area.

The Board noted the unconfirmed the CPAC minutes.

6. Matters for Noting/Information (discussed only on exception basis)

Nil matters for noting

6.1 Major correspondence

Nil major correspondence

6.2 NNSW LHD Seal

There were no items requiring the NNSW LHD Seal to be applied.

ገ.3 Updated Board Calendar

The Board noted the updated Board Calendar with the new dates of the Clinical Planning and Clinician Engagement meetings to be added.

Due to COVID-19 physical distancing requirements and the availability of appropriately sized venues, it was suggested that the July Board meeting be held at Tweed Heads if a suitable venue can be sourced.

6.4 Other matters for noting

6.4.1 Pebbles in the Pond – lived experience collaboration analysis.

The Board noted the information in the brief and the excellent work underway with this mental health project.

6.4.2 Quarterly Patient Experience Feedback Report

The Board noted the information in the brief.

6.4.3 NNSW LHD Pressure Injury Prevention and Management

A brief discussion followed on the information in the report noting the good work undertaken of Ms Katharine Duffy, Director Nursing, Midwifery and Aboriginal Health and her team.

6.5 Business without notice

Ms Hancock provided a brief critique of the meeting.

7. Meeting Finalisation

7.1 Next Meeting

29 July 2020 9.00am - 1.00pm

Venue: TBA

7.2 Meeting closed

There being no further official business, the Chair declared the meeting closed at 12.33pm

I declare that this is a true and accurate meeting record.

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Signed

Date

Dr Brian Pezzutti

Chair

Northern NSW Local Health District Board