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The Chair opened the meeting and Mr Monaghan acknowledged the Traditional Owners of this Land. He also paid his respects to 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:

Mr Peter Carter (Chair), Professor Susan Nancarrow, Mr Michael Carter, Mr Scott Monaghan, Dr Andrew White, Ms Naree Hancock, Ms Carolyn Byrne

Microsoft Teams: Dr Cathy Adams, Mr Thomas George, Dr John Griffin, Mr Ged May

Apologies: Mr Pat Grier, Dr Alasdair Arthur

#### In Attendance:

Ms Tracey Maisey, Chief Executive Ms Liz Blake, Manager Chief Executive Unit Ms Kate Greenwood, Board Secretariat

#### In Attendance for part of meeting:

Dr Will Davies, Grafton Base Hospital Medical Staff Executive Council (Virtual) Mr Richie Williamson, MP Clarence Ms Deb Newton, Executive Assistant to Mr Richie Williamson

#### 2.2 **Declaration of Pecuniary and/or Conflicts of Interest:**

In relation to Item 6.4.1 Professor Nancarrow and Mr Michael Carter declared a possible conflict of interest due to their current positions at Healthworks International and Social Futures respectively. Mr Thomas George also declared a conflict due his role on the Board of Our House.

#### 2.3 **Previous Minutes:**

2.3.1 The Minutes of the Board Meeting held on 30 August 2023 as circulated were **ENDORSED** as a true and accurate record:

Moved:

Mr Scott Monaghan

Seconded: Professor Susan Nancarrow

CARRIED

#### 2.3.2 Business Arising from the minutes:

#### 2.3.2.1 Ms Maisey to provide an update on flexible rostering to the 29 November 2023 Board meeting.

The Board noted this will be provided to the 29 November 2023 Board meeting.

#### Action:

Ms Maisey to provide an update on flexible rostering to the 29 November 2023

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Board meeting.

2.3.2.2 A Board/ELT workshop to be organised for the first quarter of 2024 to discuss reporting systems and processes with the facilitator to be confirmed.

The Board noted this will be organised as soon as possible.

#### Action:

A Board/ELT workshop to be organised for the first quarter of 2024 to discuss reporting systems and processes with the facilitator to be confirmed.

2.3.2.3 A letter of thanks to be drafted for the Board Chair's signature to acknowledge and thank Mr George Thompson's contribution to the HCQC.

The Board noted this will be provided to Mr Thompson following his last HCQC at the end of the year.

2.3.2.4 Ms Karen Winkler, Emergency Care Assessment and Treatment Project Co-ordinator to present to a future Board meeting.

The Board noted Ms Winkler will present to a Board meeting during the first half of 2024.

#### Action:

Ms Karen Winkler, Emergency Care Assessment and Treatment Project Co-ordinator to present to a meeting during the first half of 2024.

2.3.2.5 The NNSWLHD Research Team to be invited to provide a presentation update on the progression of work within their Directorate to a future Board meeting.

The Board noted the Research Team will present to the November 2023 Board meeting.

#### Action:

The NNSWLHD Research Team to be invited to provide a presentation update on the progression of work within their Directorate to the 29 November Board meeting.

2.1.1 Other Matters Arising from the minutes

Nil for this meeting.

#### 3. Matters for Decision

3.1 Recommendation to improve Board budget costs

Ms Maisey provided an overview of the information in the brief advising a financial review is being undertaken across the District which includes the Board budget.

Discussion followed regarding the value of Institutional Membership of ISQua and the need to ensure that the full benefits of membership is being realised. A cost benefit evaluation of the ISQua Fellowship will be undertaken following the completion of the Fellowship by the the four Board members and six staff due to enrol in 2023. Ms Maisey advised she has asked Mr Brett Skinner, Director Finance to re-evaluate all memberships across the District.

The Board **ENDORSED** the recommendations in the brief.

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#### 3.2 Amendments to the Delegation Manual

Ms Maisey spoke to the information in the brief, noting the ELT have approved these changes to the Delegation Manual. The Board noted that a broader review of delegations will commence in November 2023.

The Board ENDORSED the amendments to the Delegation Manual.

#### 3.3 Board Committee Review

Referring to the information in the brief, the Board noted the recommended changes to the to the current Board sub-committees. With these changes the new Board sub-committees will be:

- Finance and Performance Committee
- Audit and Risk Committee
- Medical and Dental Appointments Advisory Committee
- Health Care Quality Committee

It was agreed that the following committees become Management Committees with updates being provided through the CE report:

- Community Partnership Advisory Committee
- Research and Innovation Committee
- Clinical Planning and Clinician Engagement Committee (until mid-2024). Dr Adams will remain Chair

The following changes will occur with the below working groups:

- Environmental Sustainability and Healthcare Working Party the LHD will embed environmental sustainability across all LHD committees and it will become Business as Usual. The Working Party will be retained in a smaller form and comprise Dr Griffin, Matt Long, and Steven Hunt for 12 months followed by a review.
- Board Development Committee (working group) the CE will meet with Ms Hancock to review progress and any outstanding action to determine an approach for the group.

A query was raised regarding the Medical Staff Executive Council. Ms Maisey advised a decision will be made regarding this after further discussions with the Clinical leaders regarding the proposed streaming approaches.

It was agreed that Professor Nancarrow would remain Chair of the Research and Innovation Committee and the Board members currently on CPAC, would remain as members.

The Board **ENDORSED** the above recommendations, in line with the current Model by-laws, until the new By-laws are adopted.

#### 3.4 Changes to the LHD Top 10 Risks

Following discussion regarding the Top 10 Risks, Mr Carter provided an overview of

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the recent changes to the matrix at the 2023 LHD Risk Forum in July.

The Board noted the changes to the Top 10 Risks including the removal of COVID-19 and the addition of psychosocial health of staff as well as Climate Risk – extreme weather events. The barriers to patient flow and overdue elective surgery have been combined to create a new risk being access and demand.

Following further discussion regarding risk number 9 'Psychosocial Health of Staff', the Board agreed to increase the risk rating from moderate to high.

A lengthy discussion followed on conducting transparent conversations with staff across the District to communicate the risks, how they are being monitored and addressed.

The Board **ENDORSED** the second quarter of 2023 NNSWLHD Top 10 Risks with the amendment of Psychosocial Health of Staff risk rating from moderate to high.

### 3.5 Extension to the term of the Clinical Planning and Clinician Engagement Committee (CPCEC)

The Board noted the information in the brief regarding the proposal to extend the term of the CPCEC. It was AGREED to extend the term of the committee until mid-2024.

The Board **ENDORSED** the new CPCEC Terms of Reference with the addition of a Senior mid-wifery representative the committee.

It was AGREED that Dr Cathy Adams will continue as Chair.

#### 3.6 Finalisation of 2022/23 Financial Statement

Ms Maisey provided an update in the District's requirement to complete Financial Statements which are subject to external audit.

Ms Maisey advised the Financial Statements were endorsed and signed by the Audit and Risk Committee on 26 September 2023.

The Chair **AGREED** to sign the "Representation Letter by Those Charged with Governance" which incorporated feedback from the Audit and Risk Committee through their Chair.

#### 4. Board Strategic Priorities

- 4.1 Workforce and Culture nil for this meeting.
- **4.2 Patient Flow** nil for this meeting.
- **4.3 Environmental Sustainability and Healthcare** the Board noted the information in the ESH report.
- **4.4 Aboriginal Health** Aboriginal Medical Services has signed a partnership with the Primary Health Network and part of this process is a preferred provider model. Mr Monaghan gave a brief update on the new partnership.

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#### 5. Matters for Discussion

### 5.1 Chief Executive's Report

The CE referred to the issues that were covered in the Chief Executive's report including:

#### **5.1.1 ELT Strategic Priorities**

#### Workforce, recruitment, retention and wellbeing:

- > Update was provided on nursing recruitment activities across the District.
- > The Board noted the update brief on the People Matter Employee Survey

#### • Quality and Safety of Patient Care:

- ➤ Update was provided on the refreshed policy on increased patient supervision/individual patient specials.
- ➤ A safety alert update has been issued for Invasive Group A Streptococcal disease with a focus on children and adolescents.
- ➤ An EOI has been released for staff to participate in the 'Time to Care' program. This is a statewide initiative to create greater efficiencies in some of our systems and processes in order to make more time available for patients.

### • Empowering Aboriginal Health Together:

Rheumatic Heart Disease - An update was provided on the work being undertaken across the District with RHD regarding clinical pathway processes, staff education and community health promotional material.

#### Leadership and Communication:

- Update provided on the consideration of implementing clinical streaming models.
- ➤ Delegations Manual Amendments Refer Item 3.2
- ➤ CE Newsletter "Where's Tracey". The fortnightly CE update will now include this section on sites the CE will attend over the next several weeks so staff are aware of her movements.

#### Financial Sustainability:

- ➤ The Board noted the information in the brief "Overview of NNSW 2023/24 Service Agreement". Ms Maisey provided a comprehensive update, advising the LHD has received an increase on last years budget. The LHD will need to continue with a fiscally and sustainable approach to delivering quality, safe and appropriate services.
- ➤ The Board noted the update on the progress in relation to the financial review across the District.

### 5.1.2 Matters for Approval

Please refer to Item 3.2.

**5.1.3 Update on key issues / risks** A lengthy update was provided on the work underway to complete requirement s for the commissioning of the Tweed Valley Hospital.

#### 5.1.4 Major Key Performance Indicators

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- Emergency Treatment Performance (ETP) during August 2023 NNSWLHD was 32% against a target of 50%(admitted).
- Elective Surgery Access Performance during August 2023 was Category 1 94% against a target of 100%, Category 2 75% against a target of 97% and Category 3 77% against a target of 97%.
- Elective Surgery overdue numbers for August 2023 were Category 1 − 0, Category 2 − 345, Category 3 − 433. Plans are in place to substantially improve this over the next four months.
- Triage NNSWLHD met triage Category 1 target, Category 2 August 2023 result was 81% with a target of 95% and Category 3 result was 72% against a target of 85%.
- Transfer of Care target for August 2023 was 90% with a result of 81%.

### 5.1.5 Security, Risk and Compliance Update

Nil for this meeting.

### 5.1.6 Governance Update

- > Please refer to Item 3.1.
- > Please refer to Item 3.3.

#### 5.1.7 Digital Health Update

An update was provided on Digital Health progress across the LHD.

#### 5.1.8 Capital Works/Planning Projects

 An update was provided on the capital works and planning projects across the LHD.

#### 5.1.9 Media and Community Engagements:

- ➤ The Board noted the recent media interviews undertaken with the CE since commencing her new position.
- ➤ The Board noted the media release in relation to NNSWLHD hospitals continuing to make significant progress on planned surgery wait lists.

#### 5.1.10 Primary and Intersectoral Engagements

• Regular meeting has been established with Monika Wheeler, CEO Healthy North Coast to discuss and strengthen the partnership between the PHN and the LHD.

#### 5.1.11 Matters for noting:

Nil for this meeting.

#### **5.1.12** Important Meetings/Diary Commitments:

- Combined NNSWLHD Board and Healthy North Coast, Primary Health Network Board meeting to be held on 25 October 2023, with guest speaker Ms Tracey Johnson, CEO Inala Primary Care.
- NNSWLHD Quarterly Performance meeting with Matthew Daly, Deputy Secretary System Sustainability and Performance on 3 November 2023.
- Visit to LHD by Ms Kerry Chant, Deputy Secretary Population and Public Health on

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9 November 2023.

Ms Maisey provided an update her first seven weeks in the LHD with three main areas of focus being, leadership and communication, financial sustainability and to determine LHD risks are.

#### 5.1.13 Questions for the Chief Executive:

In relation to the Aboriginal Partnership meeting, and in light of new CEs in the LHD
and the PHN, Mr Monaghan suggested this Partnership could adopt a more clinical
outcomes focussed approach and work together on suggested outcomes for RHD,
chlamydia and other conditions to help ensure better outcomes in the clinic. This
would help with the Partnership to be more forward looking in relation to clinical
outcomes.

#### Action:

Mr Monaghan to draft a letter for the Board Chair's signature to the three local AMSs suggesting a review of the Terms Of Reference and revamping the approach of the Aboriginal Partnership meeting.

The Board ENDORSED the Chief Executive's Report.

Professor Nancarrow had to leave the meeting at 12pm and requested the Board note Item 6.4.1 before she left the meeting.

Ms Maisey and Mr George left the meeting at 12.10pm following the discussion regarding Item 6.4.1 Staff Accommodation.

#### 5.1 Committee Minutes (discussed on exception basis, otherwise noted)

#### 5.2.1 Health Care Quality Committee (HCQC) – 12 September 2023

The Board noted the HCQC minutes. Mr Peter Carter advised that Dr Adams has been appointed as the new Chair of HCQC from October 2023 as agreed earlier this year.

A question was raised on whether, given Mr Carter's departure from the Committee, Ms Hancock might be appointed to the committee. It was agreed to consult the ToR to determine the committee's composition.

The Board noted the unconfirmed HCQC minutes.

#### 5.2.2 Finance and Performance Committee (F&PC) – 20 September 2023

Mr Michael Carter provided an update on the Finance meeting. He advised at last week's meeting, the committee had not had a chance to fully review the state budget handed down the day before and therefore the forecast has changed since last week.

Premium medical workforce costs are being monitored closely at present. The District Premium Nurse Agency Efficiency Improvement Plan has seen a reduction in nurse agency costs since the introduction of the new state contract.

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The Board noted the unconfirmed F&PC minutes.

### 5.2.3 Medical and Dental Appointments Advisory (MDAAC) Committee – 10 August 2023.

In Dr Arthur's absence, the Board noted the MDAAC minutes.

The Board noted the unconfirmed MDAAC minutes.

# **5.2.4** Audit and Risk Committee Special Finance (ARC) – 7 September 2023. The Board noted the 7 September 2023 minutes will be presented to the 25 October 2023 Board meeting.

### 5.2.5 Clinical Planning and Clinician Engagement Committee (CPCEC) – 12 September 2023.

The Board noted the CPCEC meeting minutes.

- **5.2.6** Community Partnership Advisory Council (CPAC) next meeting 9 October 2023. The Board noted an update will be provided through the CE report next month.
- **5.2.7** Research and Innovation Committee (RIC) next meeting 4 October 2023. The Board noted an update will be provided through the CE report next month.
- 6 Matters for Noting/Information (discussed only on exception basis)
  Nil for this meeting.

#### 6.1 Major correspondence

Nil major correspondence.

#### 6.2 NNSWLHD Seal

There were no items requiring the NNSWLHD Seal to be applied.

#### 6.3 Calendar

#### 6.3.1 Chair's Calendar

The Board noted the Chair's Calendar.

#### 6.3.2 Updated Board Calendar

The Board noted the updated Board Calendar.

#### 6.4 Other matters for noting

- 6.4.1 Update on Staff Accommodation The Board noted the information in the brief and a lengthy discussion followed on the challenges faced in securing staff accommodation and the associated cost. Professor Nancarrow spoke on the Cudgen Connection, in relation to proposed staff accommodation on the vacant block of land opposite the TVH. The Cudgen Connection, which is the public domain, is keen to collaborate with the LHD.
- **6.4.2 Mental Health Medical Staff Council minutes:** The Board noted the 27 June and the unconfirmed 12 September 2023 minutes. The Board were advised these minutes will now be provided for information on a regular basis.

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#### 6.5 Business without notice

• The Board noted Ms Bryne will be an apology for the November Board meeting.

#### 7 Meeting Finalisation

#### 7.1 Next Meeting

25 October 2023 Healthy North Coast Office Tamar Street Ballina

#### 7.2 Meeting closed

Ms Byrne provided a critique of the meeting, following which, there being no further official business, the Chair declared the meeting closed at 12.26pm.

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

Signed	Date 25 10 Zo 23
Mr Peter Carter Chair	
Northern NSW Local Health District Board	

#### 9.05am -9.30am Mr Will Davies, GBH Medical Staff Council

Mr Davies commenced his presentation by thanking the Board for the opportunity to present to them again and bring some of the challenges and opportunities facing the Clarence Valley to their attention.

Winter bed numbers have been a challenge with intermittent closures of 18 surge beds. Dr Davies advised respiratory presentations have now settled, possibly due to mild weather and an early end to the respiratory virus season. However, during the peak season of June/July the closure of beds due to various reasons caused significant patient flow difficulties.

Referring to the Clarence Valley Clinical Services Plan, Dr Davies queried whether enough consideration has been given to future-proofing bed numbers and whether the modelling is accurate due to the current demand for health services and presentations.

An overview was provided on the Emergency Department (ED) presentations across the Clarence District and the length of stay year to date end of June 2023. Challenges in securing General Practitioners to the area has also exacerbated the number of low acuity presentations to the ED.

Dr Davies voiced his concern on the challenges confronting surgical services and referred to the extensive data contained within his presentation. There has been an increase in acuity and last minute surgery cancellations. This is due to various factors and has influenced a number of specialist Doctors in the Clarence Valley to resign from the LHD.

Providing examples of the radiology rosters, which is outsourced, Dr Davies referred to the lack of staff availability to ensure there is no real or perceived shortfall of service provision across

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the Clarence Valley.

Suggestions followed on some primary care and surgical options/solutions to the challenges facing the Clarence Valley and a lengthy discussion followed regarding these suggestions.

Ms Maisey agreed that activity and complexity are increasing at GBH as illustrated in the compelling statistics. This is a complex problem and requires a whole of system solution and partnering with clinicians, primary care colleagues and Aboriginal Medical Services in the area to create integrated care options for the Clarence Valley.

Referring to Dr Davies voicing his concerns regarding culture within the GBH, Ms Maisey indicated that a positive culture is essential to a productive workplace and she would follow up this matter. The People Matter Employee Survey results are due out soon and further work will be done to address concerns expressed in the survey.

Acknowledging the challenges with surgical services and waitlists, Ms Maisey advised she has requested Mr Dan Madden, General Manager GBH, to look at the options of opening a 4<sup>th</sup> operating theatre. A demountable on the GBH site is not possible due to the planned redevelopment, however Mr Madden will continue to review other effective solutions.

In relation to the Radiology service concerns, Ms Maisey advised she would need to seek clarification to make evidence-based decisions regarding this. In the meantime, a radiologist currently working in Tweed Heads will be relocated to Clarence Valley to help with the current situation.

The LHD needs a sustainable short, medium and long term clinical plan for the Clarence Valley which must be responsive to workforce availability and also address the acute issues in a cost-effective way.

#### Action:

Ms Maisey to provide a formal letter of response to the GBH MSC in relation to the points he raised during his presentation to the Board.

#### 9.30am - 10.00am - Mr Williamson and Ms Deb Newton

The Board welcomed Mr Williamson and Ms Newton to the meeting. Mr Williamson provided an overview of his talking points and thanked the Board for the opportunity to represent his constituents today.

Mr Williamson acknowledged the work of the Board and the staff across the LHD hospitals for their commitment to providing healthcare to their communities. He also personally thanked the Board for their support and commitment for the redevelopment of the Grafton Base Hospital.

Mr Williamson provided a brief overview of some of the matters he had foreshadowed including the increased demand for hospital services, staff shortages, staff morale, patient outcomes and ED wait times. A lengthy discussion followed on these matters, some of which had been brought to his attention by constituents.

Members of the community feel despondent about the recent loss of doctors from the area and

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while he knows mostly patient outcomes are predominently excellent, some case examples have been brought to his attention where service delivery could have been improved.

The Board and the CE thanked Mr Williamson for bringing these important matters to their attention. Ms Maisey acknowledged that while the results of the recent accreditation of the GBH were of the highest order, it was important to investigate any reports of sub-standard services that came to the attention of the LHD. Feedback from the community, such as that provided by Mr Williamson, was of particular interest. All matters raised by Mr Williamson would be followed up and feedback provided to him.

Ms Maisey noted whilst the current nursing and medical staff vacancies are reasonably consistent across the District, they remain higher than desirable however there has been a very good response to the international nurse recruitment campaign and work is underway to launch a campaign for international doctors.

The proposed Maclean District Hospital CT machine still poses concerns due to the capital costs involved although operating costs would be manageable. Ms Maisey advised she is seeking further information on this and will discuss this with Mr Williamson in due course.

In relation to ED wait times, Ms Maisey advised work is continuing on this around the District and it will monitored alongside other Performance Indicators at various sites.

The Board thanked Mr Williamson and Ms Newton for attending today and Mr Williamson for being very candid and transparent with his address to the Board.

Discussion followed on the importance of ensuring the Clarence Valley community are aware that the Board and ELT have heard their concerns and are acting on them. Suggestions followed on ways to promote the good news stories and also to reassure staff and patients that their voices have been heard.

The Board Chair acknowledged the matters raised by Mr Williamson today and asked the Chief Executive to distil the information and provide a report back to the Board at the 30 November 2023 meeting and to keep Mr Williamson up to date on progress.

#### Action:

Ms Maisey to provide a report on the progression of matters raised by Mr Williamson MP to the 29 November 2023 Board meeting.