Page 1 of 10

The Chair opened the meeting and paid his respects to Aboriginal Elders, past and present, as the traditional owners of the land, being the Bundjalung Nation and thanked them for their custodianship of the land.

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, Professor Susan Nancarrow, Mr Michael Carter, Ms Carolyn Byrne, Dr Alasdair Arthur, Dr John Griffin, Dr Allan Tyson, Ms Deb Monaghan, Ms Naree Hancock, Dr John Moran, Mr Pat Grier

In Attendance via Teleconference:

Mr Wayne Jones, Chief Executive, Mr Ged May, Community Engagement Manager Ms Jennifer Cleaver, Manager Chief Executive Office Ms Kate Greenwood, Secretariat Mr Matthew Long, Director Corporate Services (part of meeting)

Apologies:

Nil

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 29 April 2020 as circulated were ENDORSED as a true and accurate copy.

Moved:

Mr Mark Humphries

Seconded:

Dr John Moran

CARRIED

2.3.1(a) The Minutes of the combined Board Meeting between the NNSW LHD and North Coast Primary Health Network held on 29 April 2020 as circulated were ENDORSED as a true and accurate copy.

Moved:

Ms Naree Hancock

Seconded:

Dr John Moran

CARRIED

Mr Jones responded to a query regarding the winter strategy advising the program has been running for four years with good results. The George Institute Review report is expected to be available soon.

Page 2 of 10

2.3.2 Business Arising from the Minutes:

2.3.2.1 Mr Jones to request Mr Matthew Long, Director of Corporate Services to form a small working group including Mr Peter Carter and provide a report/brief/action plan on the strategies to be undertaken by the NNSW LHD to reduce environmental impact to the 27 May 2020 Board meeting.

Mr Peter Carter spoke to the information in the brief and provided a brief overview of the working group which included Mr Matthew Long, Director Corporate Services, Mr Pat Grier and Professor Susan Nancarrow.

Mr Peter Carter spoke of the responsibility as a health Board, to address climate change due the negative impact it will have on health and exacerbating the existing conditions such asthma that people may already suffer from.

Professor Nancarrow advised, whilst the working party understood the importance of the COVID crisis, it was important for the discussions around climate change to continue albeit with the current challenges of engaging people with new initiatives.

Mr Long explained the terminology 'climate risk' indicating there has been a profound shift in the way Australian regulators, organisations and the public perceive climate risk. Mr Long advised of the need for NNSW LHD to undertake a more detailed risk analysis of all climate risks across the footprint and move forward from there.

Responding to a query, Mr Long advised a baseline measurement for various indicators, including electricity and a carbon footprint was possible and he was currently looking into a template spreadsheet model.

Following a query around increased freight costs and mileage, Mr Jones indicated he would follow up with HealthShare and provide advice at a later date but did note this path had been explored previously without success.

Mr Long referred to the Honeywell project and advised the LHD continues to receive regular updates and to date the savings have exceeded the contract guarantee.

Following a lengthy discussion, the Board ENDORSED the two following recommendations:

- NNSW LHD conducts a detailed risk analysis of the various risks associated with climate change including consulting with the Ministry of Health to determine a statewide approach to measurement and submit a paper to the 28 October 2020 Board Meeting for consideration.
- The Board sets aside time on its agenda at a future meeting to discuss the topics of climate change and sustainability, including the findings in the brief.

The Chair agreed the working group continue and advised that any Board member was able to join the working group. Dr Griffin indicated he would be interested in attending the working group.

2.3.2.2 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.

The Board noted Mr Skinner will attend the 24 June 2020 Board meeting.

ACTION:

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.

2.3.2.3 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.

2.3.2.4 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.

The Board noted this will be provided to the 24 June 2020 Board meeting.

ACTION:

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.

2.3.2.5 The Chair is to correspond with The Hon Mark Coulton, Minister for Regional Health, Regional Communication and Local Government seeking an explanation around changes in road network and border changes as stated in his letter of response. Mr Jones advised that on his further reading of the letter from Minister Coulton, it did not refer to hard borders changes, but 'urban creep', and that is LGA border creep and population increases, therefore determined not to draft a further letter, but discuss with the Board.

As requested at the 29 April 2020 Board meeting this matter was raised at the Murwillumbah CAG for discussion and the Chair proposed to write directly to Minister Coulton expressing the community concerns.

2.3.2.6 Mr Jones is to contact Dr Richard Colbran, Chief Executive Officer at NSW Rural Doctors Network to seek his support to advocate on our behalf regarding the Murwillumbah rurality status.

Mr Jones corresponded with Mr Colbran, seeking his support to have the decision

Page 4 of 10

concerning the Murwillumbah rurality status reviewed. Mr Colbran acknowledged the concern and noted he had expressed disappointment in this outcome at previous opportunities.

2.3.2.7 Mr Jones to request Mr Ged May, Community Engagement Manager to raise the matter of Murwillumbah rurality status at the next scheduled teleconference Community Advisory Group (CAG).

Mr May has advised that this matter has been discussed with the Murwillumbah CAG Chair and is on the agenda for the next CAG meeting.

2.3.2.8 Mr Jones to follow up on the progress of the scanning of anaesthetic records into the eMR and report back to the 27 May 2020 Board meeting.

The Board noted the information in the brief with Mr Jones advising there are no projects planned or underway that are specific to scanning anaesthetic records into the eMR.

2.3.3 Other Matters Arising from the Minutes

2.3.3.6 Mr Jones responded to a query advising the detailed paper on changes to models of care due the COVID-19 crisis will be presented to the 28 October 2020 Board meeting.

5.1.10 The tension in PPE across the State has decreased considerably due to a reduction in the number of cases presenting and an improvement in the PPE supply chain.

Matters for Decision

3.1 NNSW LHD Planning Framework

Mr Jones spoke briefly to the NNSW LHD Planning Framework advising this will be the framework that underpins clinical services planning moving forward.

The Board ENDORSED the NNSW LHD Planning Framework.

4. Chairman's Update

4.1 Chairman's Calendar

The Board noted the Chairman's Calendar.

5. Matters for Discussion

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 Mr Jones gave a brief update on COVID planning across the LHD including:
 - COVID Response Plans have now been finalised
 - workforce planning is very advanced but requires continual review
 - update on the Private Sector Federal Government Viability Guarantee
 - regular updates and communication with staff continue
 - CAG and stakeholder teleconferences are well received

Page 5 of 10

- three northern NSW respiratory clinics are established and running well. The initial commitment was to open for a three-month period, with the view of an extension for a further three months, should the government deem it necessary.
- elective surgery 'stepped approach' will continue across the LHD moving forward
- PPE Governance Committee
- Free car parking negotiations are continuing with the Lismore City Council regarding the limited free parking for hospital staff
- compliment / letter of thanks received from family of patient treated at LBH Intensive Care Unit for COVID acknowledging the exceptional work of clinicians and staff. Mr Jones advised that the family have also uploaded the letter to social media, which has been very well received.

ACTION:

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.

Murwillumbah Rurality Status
 Refer to Item 2.3.2.5, 2.3.2.6 and 2.3.2.7

5.1.2 Update on Strategic Issues

- Empowering Aboriginal Health
- Our Community Values Our Excellent Person-Centred Care brief on the volume and type of NNSW LHD Ministerial complaints

5.1.3 Matters for Approval

Nil for this meeting

5.1.4 Major Key Performance Indicators

- Emergency Treatment Performance (ETP) during April 2020 was 80% against the target of 81%.
- Elective Surgery Access Performance during April 2020, NNSW LHD did not meet the Category 1 and 2 targets. The results were as follows: Category 1 was 98% against a target of 100%, Category 2 was 95% against a target of 97% and Category 3 was 100% against a target of 97%.
- NNSW LHD met all triage targets with all triage categories equal to or greater than the April 2019 results.
- Transfer of Care result for April 2020 was 95% against a target of 90%.

5.1.5 Security, Risk and Compliance Update

Nil for this meeting

5.1.6 Governance Update

NNSW LHD District Board Report October – December 2019

5.1.7 Capital Works/Planning Projects

Page 6 of 10

- Tweed Valley Hospital Mr Jones gave a brief update on the recent announcement of the further \$91.2M for the development of the TVH, bringing the total budget to \$673M.
- Lismore Base Hospital refurbishment tenders continue to be underway
- Ambulatory Care Unit the proposed date for handover and occupancy remains mid July 2020.

5.1.8 Matters for Noting

 Due to COVID-19 all non-essential travel has been cancelled, postponement of face to face meetings for Community Advisory Groups and transition to telehealth modalities, cancellation of meetings/functions that require greater than 25 attendees and nonauthorisation of all overseas travel.

5.1.9 Important Meetings/ Diary Commitments

- Hospital Visitation concerns expressed by some community groups, primarily
 Maternity Advocacy Groups and several Multi-Purpose Service communities around
 visitor restrictions across the LHD. Following discussions at the State Pandemic
 meeting, it was unanimously agreed that whilst noting the concerns of these groups, the
 broader risks remain and the current visitor restriction policies in NSW will remain in
 place and be reviewed in mid-June 2020. However, two support people will now be
 allowed for the birthing services only.
- Face to Face Education over the coming weeks, NNSW LHD will review its position on face to face education/training programs, with the view to reinstating these with restricted numbers of participants whilst practicing social distancing.
- 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

- Mr Jones responded to a query regarding bariatric surgery advising that this remains
 a restricted procedure in NNSW LHD due to the combination of intra and post operative
 risks. Mr Jones advised that any referral needed to go via the respective Director of
 Medical Services for consideration.
- Mr Jones explained the results around the Triage and ESAP results including the ETP figures.
- Dr Tyson gave a brief update regarding the recent media interview with The Hon Gladys Berejikilan MP, Premier of NSW on the Grafton Base Hospital redevelopment.
- Responding to a query around the Aboriginal Outcomes recruiting process, Mr Jones advised strategies are underway with Ms Kirsty Glanville, Associate Director Aboriginal Services concerning recruitment to key Aboriginal Health positions. The Chair noted the NNSW LHD Aboriginal Outcomes are exceptional when compared to other parts of the state.
- The Chair noted the information in NNSW LHD Ministerial Complaints brief.
- Mr Jones advised he will clarify the figures regarding patients not being transferred to theatre in less than 15 minutes and report back through the CE report.
- Discussion followed regarding the information in the NNSW LHD Board Report

Page 7 of 10

October – December 2019 including hospital acquired complications, third and fourth degree perineal lacerations, cardiac demographics results, malnutrition results for Lismore and Ballina Hospitals and deep vein thrombosis.

ACTION:

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.

- Mr Jones responded to a query regarding concerns being raised around care at Western NSW LHD through social media outlets, advising NNSWLHD through Ms Fiona Baker, Media Manager monitors social media for issues of concerns and progresses through the CE Office as required.
- The increased symptomatic testing continues across the State. However, complacency is a concern whilst trying to return to a 'business as usual' approach across the community.
- Following discussions during previous Board meetings, the Chair advised during the pandemic the line of authority for the Board is Mr Mark Humphries, Dr Allan Tyson and Ms Carolyn Byrne. Mr Jones advised the ELT will discuss its line of authority at next week's ELT meeting.
- The Board again acknowledged and thanked Mr Jones and the ELT for their continued excellent leadership and communication during the current pandemic health crisis.

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

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

5.2.1 Health Care Quality and Research Committee (HCQRC) – 12 May 2020.

Ms Byrne gave a brief overview of the HCQRC meeting reiterating that any clinical changes of activity regarding COVID are being captured and will be reported back to the Committee and Board in due course.

Item relating to coding and the quality of coding continues to be remain on the agenda.

Ms Byrne advised perineal lacerations continue to remain above the state average since 2018 and Ms Cathy Adams, Clinical Midwifery Consultant and the Maternity Services Committee (MSC) are monitoring this with the establishing a working party to coordinate the implementation of a Perineal Protection Bundle.

Ms Byrne referred to the brief on Escalation of Care advising Dr Tim Williams, Executive Director Medical Services is following up on the use and implementation of the Escalation of Clinical Care protocols in Emergency Departments.

The Board noted the unconfirmed HCQRC minutes.

5.2.2 Finance and Performance Committee (F&PC) – 22 May 2020.

Page 8 of 10

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

General Funds year to day \$0.4M unfavourable and forecast has improved significantly from \$8.4M unfavourable to \$1.1M unfavourable.

COVID-19 has posed significant challenges in capturing expense, funding and forecast with the process under review to improve this.

Mr Humphries reiterated the NSW State budget will not be handed down until October 2020. However, the LHD Finance Department has indicated they will set a target based budget for a guideline around July 2020.

Whilst premium labour costs continue to be significantly high across the LHD, Mr Jones advised strategies are under way to rectify this moving forward.

The Board noted the unconfirmed F&PC meeting minutes.

5.2.3 Medical and Dental Appointments Advisory (MDAAC) Committee – 14 May 2020 Dr Tyson spoke to the MDAAC minutes providing a brief overview of the meeting.

The Committee noted the resignation of Dr Paul Fowler, VMO GP Grafton Base Hospital and will issue of a letter of thanks for the Board Chair's signature.

Dr Tyson briefly outlined some of the recent appointments across the LHD.

A brief discussion followed around the extension of contracts for local radiologists until the end of September 2020. Mr Jones advised the Tender Evaluation Committee has concluded its work and the Executive Steering Group have met to clarify a few issues and anticipate further details will be available at the 24 June 2020 Board meeting.

The Board noted the unconfirmed the MDAAC minutes.

5.2.4 Audit and Risk Committee (ARC) – next meeting 3 June 2020.

The Board noted the next ARC meeting will be held 3 June 2020.

5.2.4(a) Special Finance Audit and Risk Committee - 21 April 2020

Mr Michael Carter gave a brief overview of the meeting, noting a verbal update had been provided at the April 2020 Board meeting.

Asset revaluation has been sent to Healthshare and the finalisation of the Financial Statements continues to be on track for the 17 July 2020.

Mr Michael Carter gave an update of the two significant changes regarding accounting standards around revenue and leases.

Following a discussion regarding NSW Health to engage in leases as opposed to capital investment for large pieces of equipment, Mr Jones advised he will follow up with Mr

Page 9 of 10

Matthew Long, Director Corporate Services and report back to the 29 July 2020 Board meeting.

ACTION:

Mr Jones to request Mr Matthew Long, Director 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 the unconfirmed Special Finance Audit and Risk Committee minutes.

5.2.5 Clinical Planning and Clinician Engagement – next meeting TBC.

The Board noted the Clinical Planning and Clinician Engagement inaugural meeting is yet to be scheduled.

5.2.6 Community Partnership Advisory Council (CPAC) - next meeting 15 June 2020.

The Board noted the next CPAC meeting will be held 15 June 2020.

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.

6.3 Updated Board Calendar

The Board noted the updated Board Calendar.

6.4 Other matters for noting

6.4.1 2019 Media, social media and web engagement

The Board noted the information in the brief on the trends across all aspects of the media in relation to NNSW LHD.

6.4.2 Execution of Deeds – sealing requirements

The Board noted and approved with the information provided that Board approval is not legally required before affixing NNSW LHD's seal to a document. Should the Chief Executive wish to execute a document by affixing the Seal, pursuant to the By-laws, the Board is to be notified and a register to be kept.

6.5 Business without notice

- Mr Jones advised that following the recent passing of Dr Ian Fielding, a floral tribute and card had been forwarded to Ms Maggie Cullen, Dr Fielding's partner, on behalf of the Board and ELT.
- Mr Jones responded to a query regarding the monitoring and costs of maintenance contracts, advising the NNSW LHD now has a register of leases which is monitored by Corporate Services.

Page 10 of 10

 The Board agreed the weekly COVID Board update teleconferences were no longer required, however, a weekly email update would suffice. Should an urgent matter arise for the Board's attention, the Chief Executive advised a teleconference would be scheduled.

Dr Griffin provided a brief critique of the meeting.

7. Meeting Finalisation

7.1 Next Meeting

24 June 2020 9.00am - 1.00pm

Ballina Venue: TBA

7.2 Meeting closed

There being no further official business, the Chair declared the meeting closed at 11.10am

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

Signed

Dr Brian Pezzutti Chair

Northern NSW Local Health District Board