

MINUTES OF THE MEETING OF THE NORTHERN NEW SOUTH WALES LOCAL HEALTH DISTRICT BOARD HELD ON WEDNESDAY 31 AUGUST 2022 COMMENCING AT 9.00AM, GROUND FLOOR MEETING ROOM, CRAWFORD HOUSE, LISMORE.

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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:

Board Members: Mr Mark Humphries (Chair), Mr Peter Carter, Mr Michael Carter, Mr Scott Monaghan, Mr Thomas George, Mr Pat Grier, Professor Susan Nancarrow, Ms Carolyn Byrne, Dr John Griffin, Ms Naree Hancock

Via Microsoft Teams:

Nil for this meeting

Apologies:

Dr John Moran

Dr Alasdair Arthur

Dr Allan Tyson

Mr Ged May, Community Engagement Manager

In Attendance:

Mr Wayne Jones, Chief Executive

Ms Jennifer Cleaver, Manager Chief Executive Unit

Ms Kate Greenwood, Board Secretariat

In Attendance for part of meeting:

Ms Vicki Rose, Director Integrated Care and Allied Health

Ms Monique Wilson-Stott, Senior Clinician, Podiatrist

Mr Phil Woolley, NNSWLHD Chief Information Officer

2.2 Declaration of Pecuniary and/or Conflicts of Interest:

There were no declarations of pecuniary and/or Conflicts of Interest.

2.3 Previous Minutes:

2.3.1 The Minutes of the Board Meeting held on 27 July 2022 as circulated were **ENDORSED** as a true and accurate record with the following amendments:

Page 6, Item 5.2.5 to now read: ".....effectiveness, its *memberships* and...."

Page 10, Workforce and Wellbeing Presentation heading to read " – Dr Richard Buss"

Moved: Ms Naree Hancock

Seconded: Ms Carolyn Byrne

CARRIED

2.3.2 Business Arising from the minutes:

Nil matters arising from the Minutes.

2.3.2.1 Mr Jones to request Mr Phillip Woolley, Chief Information Officer to provide a

presentation on Cyber Security to the 31 August 2022 Board meeting.

The Board welcomed Mr Woolley to the meeting.

Mr Woolley provided an overview of his presentation on NSW Government Cyber Security Policy and Essential 8 Maturity Model Attestation 2022.

The Australian Cyber Security Centre released a report indicating Health was the second largest industry under attack in Australia.

Mr Woolley spoke on the threat activity advising NSW Health has thwarted >218 million attacks over June/July this year. There were six recorded cyber incidents for NSW Health in June - July, three which were false positives and three were easily remedied.

An overview was provided on the number of firewall penetration attempts on the LHD in a 24 hour period being approximately 7 million. Mr Woolley advised the LHD undertakes an annual firewall penetration test where a third party is contracted to undertake an assessment on the resilience of the entire network to mitigate risks, threats and implement the enhancement requirements needed.

Each LHD is assessed under the NSW Government Cyber Security Policy which has 20 requirements and the Australian Cyber Security Centre Essential 8 Maturity Model.

For the 2022 year, NNSWLHD maturity levels has fallen from 2021 due to more stringent assessment criteria. The 2023 targets are also below the NSW Government threshold.

Putting this into context, Mr Woolley explained eHealth NSW maturity levels have also reduced to align with the more stringent criteria. As a result of this, the LHD is limited by eHealth NSW maturity level for some components.

Mr Woolley spoke about where the LHD sits within the policy requirements and Essential 8 maturity levels.

Mr Woolley was pleased to report the LHD will commence recruitment to a Manager, Architecture and Security position which will position the LHD to increase its Essential 8 maturity levels. Work also continues around infrastructure upgrades and replacements are incrementally increasing the LHD capabilities.

Mr Woolley spoke on the current challenges in improving our maturity posture with work underway to ensure the LHD is on the front foot to withstand an attack.

Responding to a query regarding the level of risk for the NNSWLHD, Mr Woolley advised whilst the IT&T staff are very capable, there are challenges with knowing the nature of attacks that could eventuate. There will always be a heightened level of risk for cyber security and processes are in place to mitigate the effects in the event of this occurring.

Work is currently underway with eHealth NSW to provide further data around these risks and the LHD is drilling down at a local level to fully understand the areas of accountability and responsibility to manage on a day-to-day level.

Ms Byrne noted that cyber security remains on the NNSWLHD Top 10 Risks and is monitored through the Audit and Risk Committee, where Mr Woolley will be providing this presentation next month.

The Board thanked Mr Woolley for his time and presentation today.

2.3.2.2 Mr Jones to organise a follow-up Board workshop to include the Executive Leadership Team following the 26 October 2022 Board meeting.

This will be completed on 26 October 2022 Board meeting.

ACTION:

Mr Jones to organise a follow-up Board workshop to include the Executive Leadership Team following the 26 October 2022 Board meeting.

2.3.2.3 Mr Jones to request Ms Kathryn Watson, Associate Director Planning to review the effectiveness of the Clinical Planning and Clinician Engagement Committee (CPCEC) and report back 26 October 2022 Board meeting.

This will be provided to the 26 October 2022 meeting.

ACTION:

Mr Jones to request Ms Kathryn Watson, Associate Director Planning to review the effectiveness of the CPCEC committee and report back 26 October 2022 Board meeting.

2.3.3 Other Matters Arising from the minutes

Nil for this meeting

Matters for Decision

3.1 2021/22 NNSWLHD Corporate Governance Attestation – The Board noted the information in the document and a brief discussion followed.

The Board **ENDORSED** the 2021/22 NNSWLHD Corporate Governance Attestation Statement.

Moved: Professor Susan Nancarrow

Seconded: Mr Scott Monaghan

CARRIED

4. Board Strategic Priorities

4.1 Workforce Culture – update was provided to 27 July 2022 Board meeting.

4.2 Patient Flow - presentation will be provided to 28 September 2022 Board meeting.

4.3 Environmentally Sustainable Healthcare – the Board noted the information in the brief.

4.4 Aboriginal Health – update was provided to 27 July 2022 Board meeting.

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

- **People Matters Employee Survey** – the survey has commenced, and a significant promotional program is underway to encourage staff to complete the survey and have their say.
- **Accommodation** – the LHD continues to explore short term staff accommodation options across the district.
- **Coronavirus/Influenza** – reported positive tests numbers continue to slowly decline across the district with a corresponding stabilising of hospitalised patients. Furloughing continues to place pressure on workforce supply.
- **Vaccination Program** – All category A health care workers will be required to receive a third vaccine dose or sign a declaration agreeing to comply with required PPE as determined by the health organisation.
Mobile vaccination clinics continue to target vulnerable and flood affected communities in addition to the three main clinics.
- **Elective Surgery** – an update was provided on the Anaesthetic Group in Lismore negotiations regarding public patients in private hospitals. Despite this position, the overdue wait list numbers continue to decline.
- **NNSWLHD Quality Awards 2022** – the Awards were held on 24 August 2022 and feedback has been very positive.
- **Monthly Performance Level** – The LHD's quarterly Performance meeting was held on 19 August 2022. Noting some minor concerns, the MOH expressed their appreciation and congratulations for another successful year. NNSWLHD retained a Performance Level of 0.
- **Resignation of NCPHN Chief Executive** – the Board noted the letter from Dr Adrian Gilliland, Chair Healthy North Coast advising of the resignation of Ms Julie Sturgess, Chief Executive.
- **Representation from Grafton Base Hospital Medical Staff Council** – an update was provided.
- **Grafton Redevelopment** – an update was provided on the meeting with Mr Paul Toole MP, Deputy Premier, Ms Bronnie Taylor MP, Minister for Regional Health, Mr Chris Gulaptis MP Member for Clarence and various other stakeholders to discuss concerns expressed by the community around funding timeframes for the GBH redevelopment.

5.1.2 Update on Strategic Issues

Strategic Priority: Our Community Values Our Excellent Person-Centred Care:

The Board noted the information in the brief on SMS Service linked to the medical imaging appointment system.

Strategic Priority: Our Community Values Our Excellent Person-Centred Care:

The North Coast Population and Public Health Unit monthly update was noted.

Strategic Priority: Champions of Innovation and Research:

The Board noted the information in the brief: Updated NSW and NNSWLHD Population Projections.

5.1.3 Matters for Approval

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- Nil for this meeting

5.1.4 Major Key Performance Indicators

- Emergency Treatment Performance (ETP) during July 2022 NNSWLHD did not meet the ETP target of 50% (admitted) with a result of 27.5%.
- Elective Surgery Access Performance during July 2022 was Category 1 93% against a target of 100%, Category 2 58% against a target of 97% and Category 3 was 61% against a target of 97%.
- Elective Surgery overdue numbers for July 2022 were Category 1 – 13, Category 2 – 492, Category 3 – 963.
- Triage – NNSWLHD met triage Category 1 target, Category 2, July 2022 result was 76% with a target of 95% and Category 3, result was 66% against a target of 85%.
- Transfer of Care target for July 2022 was 90% with a result of 77%.

5.1.5 Security, Risk and Compliance Update

- Nil for this meeting.

5.1.6 Governance Update

- Nil for this meeting.

5.1.7 eHealth Update

- An update was provided on eHealth progress across the LHD, including the 2022 Cyber Security Annual Attestation, Rural Funding Submission and the new Chief Clinical Information Officer position funding.
- Mr Jones acknowledged the fantastic work of Mr Woolley and reiterated the LHD is very fortunate to have him as part of the team.

5.1.8 Capital Works/Planning Projects

- Tweed Valley Hospital – building works continue with significant development across the construction footprint. An update was provided on the Tweed Valley Hospital Topping Out Ceremony held on 2 August 2022.
- Murwillumbah District Hospital – the staff at MDH were provided a face to face update on the future scopes of services. The presentation was well received with many staff noting they were pleased with the information and reassurance of how it will network with the new TVH. Ms Janelle Saffin MP, Member for Lismore was also pleased with the proposed direction of the MDH.
- Lismore Base Hospital – service relocations continue following completion of the redevelopment works.
- Rural Minor works – the LHD has been notified of successful applications for Rural Minor Works Program Funding for this and next financial year.

5.1.9 Matters for Noting

- Nil for this meeting.

5.1.10 Important Meetings/ Diary Commitments

- Nil for this meeting.

Questions for the Chief Executive without Notice

- Mr Jones responded to a query regarding the recent NSW Government announcement of the possible Urgent Care Clinics across the state.
- Responding to a query regarding the recent Diphtheria case in the NNSWLHD, Mr Jones advised that he and Dr Paul Douglas, Director Public Health confer regularly around these matters.
- Mr Jones provided an overview of how the Junior Medical Officers recruitment process works across the State.
- A brief explanation ensued regarding the Category 1 overdue rate and the process in place to help reduce these numbers.
- Ms Byrne requested an update on the winners of the 2022 NNSWLHD Quality Awards.

ACTION:

Ms Jenny Cleaver to forward the 2022 NNSWLHD Quality Awards videos to Board members for their information.

- Responding to a query regarding Own Source Revenue, Mr Jones indicated he would be happy to provide a brief to a future Board meeting.

ACTION:

Mr Jones to provide a brief on NNSWLHD Own Source Revenue to 26 October 2022 Board meeting.

- A discussion followed regarding the Grafton Base Hospital redevelopment, workforce challenges and the strategies in place to progress these matters.

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

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

5.2.1 Health Care Quality Committee (HCQC) – 9 August 2022.

Mr Peter Carter provided a brief overview of the minutes.

The Board noted the unconfirmed 9 August 2022 HCQC minutes.

5.2.2 Finance and Performance Committee (F&PC) – 17 August 2022

Mr Michael Carter provided an overview of the F&PC meeting.

Challenges remain around the budget and the LHD is slightly behind in activity targets which has kept unfavourability slightly down.

Locum costs continue to be high across the LHD, primarily with the nursing sector and is anticipated to remain this way for some time.

The Board noted the unconfirmed 17 August 2022 F&PC minutes.

5.2.3 Medical and Dental Appointments Advisory (MDAAC) Committee – 11 August 2022.

In Dr Arthur's absence, Mr Jones provided an overview of the recent appointments and resignations across the LHD.

The Committee noted the unconfirmed MDAAC minutes.

5.2.4 Audit and Risk Committee (ARC) – next meeting 7 September 2022.

The Board noted the next ARC meeting is the 7 September 2022.

5.2.4a Special Finance Audit and Risk Committee (ARC) – 15 July 2022.

Ms Byrne provided an overview of the Special Finance ARC

The Board noted the unconfirmed Special Finance ARC 15 July 2022 minutes.

5.2.5 Clinical Planning and Clinician Engagement Committee (CPCEC) – 19 July 2022.

The Board noted the CPCEC minutes and that a verbal update was provided to the 27 July 2022 Board meeting.

5.2.6 Community Partnership Advisory Council (CPAC) – next meeting 1 August 2022.

Mr Jones indicated community meetings are extremely productive and the contribution from Mr Luke Elias, Community Manager Healthy North Coast is very informative and useful. The community and LHD welcome Mr Elias's contribution to this committee and the COVID Community Forums.

The Board noted the unconfirmed 1 August 2022 CPAC minutes.

5.2.7 Research and Innovation Committee (RIC) – 3 August 2022.

Professor Nancarrow provided an overview of the RIC minutes.

The presentation on research capacity and collaboration by Ms Vicki Flood, Director, University Centre for Rural Health was very well received.

Mr Peter Carter referred to the number of 2022 NNSWLHD Quality Awards presentations that were based around innovation was very encouraging to see.

The Board noted the unconfirmed 3 August 2022 RIC minutes.

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 Chairman's Calendar

The Board noted the Chairman's Calendar.

6.3.2 Updated Board Calendar

The Board noted the updated Board Calendar.

6.4 Other matters for noting

Nil for this meeting.

7. Meeting Finalisation

Mr Michael Carter provided a critique of the meeting.

7.1 Next Meeting

28 September 2022

Grafton Base Hospital

7.2 Meeting closed

There being no further official business, the Chair declared the meeting closed at 12.20pm

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

Signed

Date

Mr Mark Humphries

Chair

Northern NSW Local Health District Board

9am – 9.20am Patient Story – High-Risk Foot Service, Ms Monique Wilson-Stott, Senior Clinician, Podiatrist

The Chair welcomed Ms Wilson-Stott to the meeting and Ms Vicki Rose, Director of Integrated Care and Allied Health provided an overview of how the High-Risk Foot Service (HRFS) was an initiative of the Leading Better Value Care program.

Ms Wilson-Stott outlined the patient story of a 63-year-old gentleman who presented to the emergency department earlier this year. The story continued summarising the patient's long journey and challenges of managing a severe diabetic foot infection and multiple surgeries. There was a strong possibility of needing a below knee amputation, however, the final washout proved successful after a 20-day admission on oral antibiotics. He was closely monitored in the HRFS for complex wound management and linked with community nursing.

Education and positive changes have been made in managing his diabetes and wound resolution will be reviewed with the Community Podiatrist on an ongoing basis. The patient understands that if there are any signs of infection, he knows to contact the HRFS for an urgent review or present to the emergency department.

Ms Wilson-Stott advised that an estimated 57% of patients referred to the service have previously been hospitalised with a diabetic foot infection with 71% patients healing within a 12-week period. The mortality rate is 60% lower when compared with a clinically similar group of patients not attending a HRFS. Ms Wilson-Stott referred to the percentage of patients who are less likely to require hospitalisation, surgical intervention or require amputation during their HRFS care and after HRFS care.

Responding to a query, Ms Wilson-Stott advised the HRFS has lost clinical space due to the flood, but the service is available for contact 5 days a week via community visits.

Mr Jones acknowledged Ms Wilson-Stott and her team on the excellent work undertaken in the HRFS and thanked them for the valuable contribution they are making to so many patients.

The Board thanked Ms Wilson-Stott for her very informative and interesting presentation today.

9.20am – 9.50am – Ms Vicki Rose, Director Integrated Care and Allied Health

The Board welcomed Ms Rose to the meeting. She provided an overview of the Integrated Care and Allied Health Directorate Organisational Chart.

The Allied Health Professional Lead has involved work around:

- Strategic Professional Lead for Allied Health
- Allied Health Governance Structure
- Leading contemporary allied health service models
- Conjoint allied Health research position – Bond University
- New Allied Health Graduate Program

Ms Rose spoke on Value Based Healthcare providing an overview on how NSW Health is shifting from volume to value-based care which involves delivering person-centred, integrated, accountable and value drive services.

NNSWLHD has recently reviewed and updated strategy and governance and embedded the use of analytics. By monitoring, evaluating and by using a process of co-design it allows the team to quantify the outcomes and potential for improvement in existing services and better understand and target patients' cohorts when designing new services as well as improving our cases for changes. Some examples of this work will include Renal Supportive Care, High Risk Foot Service, Osteoporosis Refracture Prevention and emergency Department presentations and admissions.

Ms Rose spoke on Integrated Care, providing an overview of 3 scaled initiatives, patient experience, co-design and inclusion and HealthPathways.

Health Promotion currently has several services across the LHD, including Love Bites, Health Literacy Project and Helping You 2 Quit.

Ms Rose spoke on a range of other services incorporated in her portfolio including Virtual Care, Integrated Care eHealth Solutions, Priority Populations, Oral Health and Real Outreach Service.

Developing Aboriginal Partnerships has played an important role in establishing the Integrated Aboriginal Chronic Care Service and Aboriginal Healthy Lifestyle Program. The Aboriginal Healthy Lifestyle Program is currently undergoing a review to ensure it is fit for purpose.

The Respiratory Services Program have faced many challenges through COVID. The program has undergone a clinical redesign to ensure it can provide the best possible service to patients.

Cardiac and Chronic Disease Program have been operating across the LHD for a considerable amount of time. This is a valuable service within the community.

The Board thanked Ms Rose for her presentation and acknowledged her excellent work in managing such a large portfolio.

Board Development: Update by individual Board members

As an action from the NNSWLHD Board Development Plan, Mr Pat Grier and Ms Carolyn Byrne provided a brief overview on their professional background and the strengths they bring to the Board. Mr Monaghan and Mr George will provide their updates next meeting.