
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: Mr Mark Humphries (Chair), Mr Peter Carter, Mr Michael Carter, Dr Allan Tyson, Mr Pat Grier, Dr John Griffin, Dr Alasdair Arthur, Ms Carolyn Byrne

Via Zoom:

Dr John Moran

Mr Scott Monaghan

In Attendance:

Ms Lynne Weir Acting Chief Executive

Mr Ged May, Community Engagement Manager

Ms Jennifer Cleaver, Manager Chief Executive Office

Ms Kate Greenwood, Board Secretariat

In Attendance for part of meeting:

Ms Michelle Bridges, Nurse Manager, Specialist Palliative Care Service

Ms Lisa Beasley, NNSWLHD Manager Community and Allied Health

Mr Wayne Jones, Chief Executive

Ms Katharine Duffy, Director Nursing, Midwifery and Aboriginal Health

Apologies:

Ms Naree Hancock, Professor Susan Nancarrow

Declaration of Pecuniary and/or Conflicts of Interest

Professor Nancarrow has submitted her 2022 Conflict of Interest Declaration, via email to the Chief Executive Office outlining her potential conflict due to her business partner owning a block of land adjacent to the Tweed Valley Hospital site. Professor Nancarrow has declared that she has no direct link to, or involvement with the Cudgen Connection.

The Board Chair advised, Ms Elizabeth Koff, NSW Secretary Health has resigned from her position from 3 March 2022. Ms Susan Pearce, Deputy Secretary, Patient Experience and System Performance has been appointed as the new NSW Secretary Health.

ACTION:

A letter of congratulations to be drafted for the Board Chair's signature to be forward to Ms Susan Pearce on her recent appointment as the new NSW Secretary Health.

Following a brief discussion, the Board **ENDORSED** annual leave for Ms Lynne Weir, Acting Chief Executive from 7 March 2022 – 21 March 2022. Mr Matt Long, Director Corporate Services will be the Acting Chief Executive during this time.

2.3 Previous Minutes:

2.3.1 The Minutes of the Board Meeting held on 25 January 2022 as circulated were **ENDORSED** as a true and accurate copy.

Moved: Dr Allan Tyson
Seconded: Dr Alasdair Arthur
CARRIED

2.3.2 **Business Arising from the minutes:**

2.3.2.1 **The Chief Executive is to provide additional information around proposed services at Murwillumbah District Hospital and community services that will remain at The Tweed Hospital site to the 30 March 2022 Board meeting.**

The Board noted this will be provided to the 30 March 2022 Board meeting.

ACTION:

The Chief Executive is to provide additional information around proposed services at Murwillumbah District Hospital and community services that will remain at The Tweed Hospital site to the 30 March 2022 Board meeting.

2.3.2.2 **Further discussion around the models of care for hospital in the home for future healthcare delivery to be discussed at a future meeting.**

The Board noted this will be provided to a future meeting.

2.3.2.3 **Mr Jones to provide an amended Clinical Planning and Clinician Engagement Committee meeting membership with the quarterly NNSWLHD Service Agreement KPIs update to the 23 February 2022 Board meeting.**

Ms Weir advised that the committee has agreed to organise an EOI for membership of the Committee and will report back to a future meeting on the outcome of the EOI process.

The quarterly NNSWLHD Service Agreement KPI's update is provided in the CE Report under Item 5.2.1.

Discussion was held related to the reporting of clinical incidents, corporate incidents and workplace health safety. Ms Weir advised that all safety reports are submitted through the Health Care Quality and Audit and Risk Committees with all relevant reports brought to the Board's attention via the Committee minutes.

2.3.2.4 **Ms Weir to provide a brief outlining strategies on how the NNSWLHD can reset the organisation's culture to the 23 February 2022 Board meeting.**

Ms Weir spoke on the information in the brief advising that the results in the People Matter Employment Survey (PMES) is an opportunity for management to have an insight into factors contributing to the satisfaction and dissatisfaction of employees work life. A strategy has been endorsed by the Executive Leadership Team (ELT) to address 'above and below the line' behaviours. This will be workshopped at each site/facility to ensure buy-in from all staff.

Ms Weir advised she will request Dr Richard Buss, Director Workforce to provide an update on the work being undertaken on culture across the LHD.

ACTION:

Ms Weir will provide a Workplace Culture update to the 29 June 2022 Board meeting.

Following discussion regarding the lengthy recruitment process for new staff across the LHD, Ms Weir advised there will be a review undertaken on the delays of two Assistants in Nursing positions and report back on where improvements can be made.

ACTION:

Ms Weir to provide information around the recruitment delays for two Assistants in Nursing positions and strategies put in place to address these concerns to the 30 March 2022 Board meeting.

Responding to a query regarding the new Performance Appraisal System (PAT), Ms Weir advised that training has commenced on the new system across the District.

2.3.2.5 Ms Weir to request the NNSWLHD Information Technology Department to provide a presentation on the processes and methods in place to ensure cyber security across the LHD to the 23 February 2022 Board Meeting.

Ms Weir spoke to the information in the brief advising cyber security is very closely monitored by the Ministry of Health. As a strategic risk for NNSWLHD, it is managed through Information Security Management System governance system and structure. The District undertakes regular cyber-attack testing and incident response planning exercises.

The Board noted the information in the Brief.

2.3.2.6 Ms Weir to provide an update report on NNSWLHD coding status to the 23 February 2022 Board meeting.

Speaking to the brief, Ms Weir advised the update on the coding status is a good news story. The LHD is currently not using any contract coders and some of the achievements have been the result of the District putting on trainee coders. Despite the changes to the LHD's coding workforce over the past 12 months, the group are working well to manage throughput and ensure improvement in the quality of clinical coding.

Ms Weir advised that information on wage and condition disparities between Queensland and NSW salary rates for nurses and Junior Medical Staff will be provided for information in the March 2022 CE report.

ACTION:

Ms Weir to draft a letter for the Board Chair's signature acknowledging the excellent work undertaken by clinical coders across the District.

2.3.2.7 Ms Weir to provide an update report on Patient Reported Measures to the 27 July 2022 Board meeting.

The Board noted this will be provided to the 27 July 2022 Board meeting.

ACTION:

Ms Weir to provide an update report on Patient Reported Measures to the 27 July 2022 Board meeting.

2.3.3 Other Matters Arising from the minutes

Nil for this meeting

3. Matters for Decision

3.1 NNSWLHD Reconciliation Action Plan

A discussion followed on the excellent work undertaken in completing the NNSWLHD Reconciliation Action Plan, which will be launched in early 2022.

The Board **ENDORSED** the NNSWLHD Reconciliation Action Plan October 2021 – October 2023.

Moved: Dr Alasdair Arthur

Seconded: Dr Allan Tyson

CARRIED

Mr Scott Monaghan agreed with the Chair's request to be part of the RAP Working Group moving forward.

3.2 Leave of Absence – Professor Susan Nancarrow

The Board **AGREED** to approve a leave of absence for Professor Susan Nancarrow from 23 February 2022 to 30 April 2022.

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

Ms Weir referred to the issues that were covered in the Chief Executive's Report including:

5.1.1 Current and Significant Issues

- **Clinician Engagement**
- **Coronavirus** – NNSWLHD has reported a total of 30,000 COVID cases up until February 2022. Bed utilisation for COVID has fallen from its peak in mid-January. An overview was provided on the number of COVID related deaths across the District. Visitor restrictions remain in place and are assessed weekly. At present, one visitor for one hour once a day between 1pm-6pm.
- **Staffing and Service Modifications** – Staffing furloughs continue to be a challenge across the LHD with staff continuing to work tirelessly to meet the additional demands.
- **Vaccination Program** – Lismore, Tweed and Grafton clinics have been adjusted to 6 days a week and outreach clinics have commenced.
- **ATAGI advice** – change in definition of 'up-to-date' status for COVID vaccines may impact the status of an individual's immunisation certificate and sufficient time should be provided to support implementation.
- **Staff/Community Communication** – Weekly COVID update for staff and community forums.
- **NSWNMA Strike** – strike was held Tuesday 15 February 2022. Approximately 100 nurses across the District participated and services were impacted at Grafton and

Tweed Hospitals.

- **Northern NSW Academic Health Alliance** - Tweed Valley Hospital tender for education partners has identified an opportunity to partner with the NNSW Academic Health Alliance. A presentation of their vision was presented to NNSWLHD Board and Executive on the 9 February 2022. Work continues around finalising the partnership.

5.1.2 Update on Strategic Issues

- The Board noted the information in the brief on Performance update against Service Agreement KPI's to December 2021.

5.1.3 Matters for Approval

- Nil for this meeting

5.1.4 Major Key Performance Indicators

- Emergency Treatment Performance (ETP) during January 2022 NNSWLHD did not meet the ETP target of 50% (admitted) with a result of 32.2%.
- Elective Surgery Access Performance during January 2022 was Category 1 97% against a target of 100%, Category 2 80% against a target of 97% and Category 3 was 100% against a target of 97%.
- Elective Surgery overdue numbers for January 2022 were Category 1 – 5, Category 2 – 368, Category 3 – 487.
- Triage – NNSWLHD met triage Category 1 target, Category 2, December 2021 result was 78% with a target of 95% and Category 3, December 2021 result was 75% against a target of 85%.
- Transfer of Care target for January 2022 was 90% with a result of 85%.

5.1.5 Security, Risk and Compliance Update

- Please refer to Item 6.4.2.

5.1.6 Governance Update

- NNSWLHD Top 10 Risks – fourth quarter 2021.
The Board **ENDORSED** the NNSWLHD Top 10 Risks – fourth quarter 2021.

Moved: Dr Alasdair Arthur

Seconded: Mr Michael Carter

CARRIED

5.1.7 eHealth Update

- Introduction of new Commonwealth Critical Infrastructure legislation. This is for hospitals with ICUs needing to have cyber security risk management plans and a risk management software program.
- NNSWLHD IT Team received a positive mention in an eHealth cyber security new bulletin regarding the quick response around Log4j concerns.

5.1.8 Capital Works/Planning Projects

- Assets Refurbishment and Replacement Program work has commenced across many of our facilities
- Update provided on the installation of solar panels at Byron Central Hospital and the anticipated savings per annum in energy costs.

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- Lismore Base Hospital – tiered seating in Auditorium is progressing and passive fire rectification and sprinkler installation to all levels is complete.
 - Tweed Valley Hospital – slab pour is progressing for higher levels and services rough-in and early fit out of the lower levels has commenced.

5.1.9 Matters for Noting

- Professor Vicki Flood has been appointed as the Head of Clinical School, Rural Clinical School (Northern Rivers)

5.1.10 Important Meetings/ Diary Commitments

- 2022 Board Members Conference to be held 28 March 2022.
- Board Development Workshop to be held 30 March 2022.

Questions for the Chief Executive without Notice

- Responding to a query regarding the implementation of solar panels across the District, Mr Griffin indicated that the Environmental and Sustainability Healthcare Committee is reviewing the possibility of adding solar to other buildings across the Local Health District.
- Following a query regarding timelines around the NNSWLHD Top 10 Risks, The Board requested the Audit and Risk Committee incorporate a timeframe to the table for each of the Top 10 Risks to indicate when the risk was first raised.
- Ms Weir and Mr Jones advised of the appointment of the Tweed Hospital Medical Staff Council with Dr Joe Ogg and Dr Troy Kay as co-chairs and Dr Alison Winning and Dr Steve Abbey as deputy chairs.

The Board **ENDORSED** the Chief Executive's Report.
Ms Byrne and Mr Jones left the meeting.

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

5.2.1 Health Care Quality Committee (HCQC) – 8 February 2022.

Mr Peter Carter provided an overview of the HCQC meeting.

A review of the HCQC agenda is currently underway with the recently appointed Director Clinical Governance, Mr Ken Hampson, and the newly appointed committee Chair.

A representative from the Clinical Excellence Commission will be providing feedback to the next HCQC meeting regarding the pros and cons around the ability to copy and paste in electronic medical records

The Board noted the unconfirmed HCQC minutes.

5.2.2 Finance and Performance Committee (F&PC) – 16 February 2022

Mr Michael Carter provided a brief overview of the F&PC minutes.

There has been a significant improvement in the YTD and projected end of year result.

Own Source Revenue result reflects increased revenue targets received from MOH over recent years and is consistent with the FY21 financial results.

Mr Michael Carter provided an update on the NWAU's activity across the District.

The District received a \$1.4M rebate from NSW Pathology and projects a \$2.5M rebate between now and the next financial year.

5.2.3 Medical and Dental Appointments Advisory (MDAAC) Committee – 10 February 2022.

Dr Arthur provided an overview of the recent appointments and resignations across the District.

The Board noted the unconfirmed MDAAC minutes.

5.2.4 Audit and Risk Committee (ARC) – *next meeting 2 March 2022.*

The Board noted the next ARC meeting is scheduled for the 2 March 2022.

5.2.5 Clinical Planning and Clinician Engagement Committee (CPCEC) – 15 February 2022.

Dr Tyson spoke on the planning underway to increase membership with the CPCEC. The new committee structure seems to be working well and Dr Arthur agreed that as for any new committee, changes needed to be implemented along the way to ensure the desired outcome is reached.

5.2.6 Community Partnership Advisory Council (CPAC) – 7 February 2022

Mr May provided a brief overview of the unconfirmed minutes.

A brief overview was provided on the 2021 CPAC and CAG Evaluation Summary. Meetings are going well, with good community participation with current members, however recruitment has commenced for further membership both at CPAC and CAG levels.

The Board noted the unconfirmed minutes.

5.2.7 Research and Innovation Committee (RIC) – 2 February 2022.

The Board noted the Minutes will be provided to the 30 March 2022 meeting.

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 Updated Board Calendar

The Board noted the updated Board Calendar.

6.4 Other matters for noting

6.4.1 Environmental and Sustainability Healthcare (ESH) Update

Mr Peter Carter provided an update on the recent ESH meeting.

Speaking briefly regarding the evaluation of various committees against an external tool, Ms Weir indicated this can be discussed in further detail during the Board Development Workshop next month.

The Board noted the ESH update.

6.4.2 NNSWLHD Anderson Review Recommendation Update

The Board noted the information in the NNSWLHD Anderson Review recommendation.

6.5 Business with Notice

6.5.1 Update on Board Development Working Party

The Board noted the information in the Board Development Plan and noted further discussion will take place during the Board Development workshop scheduled for 30 March 2022.

7. Meeting Finalisation

Mr Michael Carter provided a critique of meeting.

7.1 Next Meeting

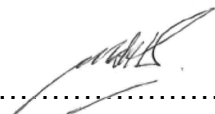
30 March 2022

Invercauld House, 163 Invercauld Road Goonellabah

7.2 Meeting closed

There being no further official business, the Chair declared the meeting closed at 12.56pm.

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

Signed 

Date 06/04/22

Mr Mark Humphries

Chair

Northern NSW Local Health District Board

Presentation 9.10am - 9.40am NNSWLHD Palliative Care Service – Ms Lisa Beasley, NNSWLHD Manager Community and Allied Health, Ms Michelle Bridges Nurse Manager, Specialist Palliative Care Service

The Chair welcomed Ms Beasley and Ms Bridges to the meeting.

Ms Bridges commenced the presentation with an overview of the NNSWLHD Specialist Palliative Care Service. A new Model of Care has been developed in 2020/21. The model of care includes:

- clinical stream/program for palliative care with a single integrated management structure
- focus on avoidance of hospital presentations and an enhancement of care for patients who choose to die at home
- multidisciplinary team approach
- end of life care across a range of settings
- access to 7 day a week service
- access to after-hours telephone support
- access to non-clinical care packages

An overview was provided of the recruitment under way within the service including a Bereavement Project Officer commencing this month.

Ms Bridges spoke on the service expansion across the LHD including a service agreement with Lotus Palliative Care, a 7 day a week specialist nursing service coverage, after hours on-call telephone support, social work coverage extended so all areas in the District have community coverage.

Due to the cessation of the Silver Chain service, a new Out of Hospital Care, End of Life non-clinical care package was implemented by the Ministry of Health. NNSWLHD has been allocated six of these packages per week with a central referral system.

A brief summary was provided on the achievements and challenges to date.

Ms Bridges completed the presentation with a Patient Story and reiterated that achieving a patient's wishes at end of life is one of the greatest rewards of providing excellent palliative care.

The Chair thanked Ms Bridges and Ms Beasley for their presentation today.

Presentation 9.30am- 10.00am Nursing and Midwifery Priorities Overview – Ms Katharine Duffy, Director Nursing, Midwifery and Aboriginal Health

Ms Duffy was welcomed to the meeting and provided a brief overview of her presentation today.

Speaking of the excellent work undertaken by her Directorate, Ms Duffy referred to the Our Journey 2020-2021, Nursing and Midwifery Research 2019-2021 and Strategic Priorities 2018-2023 Action Plans.

Providing an overview of the Nursing and Midwifery Governance Structure, this included the four areas of clinical practice, research, workforce, and information technology.

The Excellence Program is a peer review assessment program that recognises, encourages, facilitates and rewards learning, practice development and innovation in all aspects of nursing and midwifery, that are scheduled again later this year.

Referring to the Clinical Resource Program, Ms Duffy advised that this program supports passionate and committed clinicians to become patient advocates, mentors, and clinical leaders within the profession. Amongst other opportunities, it will also improve patient care, treatment outcomes, support skill development and critical thinking ability for staff and increase job satisfaction and confidence for staff.

Ms Duffy gave an overview of the Speciality Clinical Advisory Networks (SCANs) and how this will improve clinical practice and delivery of care in speciality areas, define core speciality skills and capabilities and provide a forum for professional networking and collaboration.

Speaking on the Clinical Innovation Units, (CiU's) Ms Duffy indicated this will lead the implementation of new clinical and patient focused initiatives. There are currently 7 CiU's across the District, which were selected through a highly competitive process.

A brief summary was provided on the Nursing and Midwifery outcomes, the Strategic Research Framework, and the Comprehensive Care Program.

The Leadership Development Framework is a robust framework with conscious leadership at its centre. Each domain of the framework has clear objectives and behavioural cues so that Unit Managers can self-assess as they progress. The main pillars include development pathway, coaching and mentoring, LEAP masterclasses and leadership support and resources.

The Board thanked Ms Duffy for her comprehensive and informative presentation today.