

Minutes CCLHD Board Meeting

Tuesday, 26 November 2024

Time: 5:30pm to 8:00pm

Venue: Wyong Hospital, Conference Room, Education Centre

VISION: **Trusted care. Better health for everyone.**

We are unwavering in providing our community with care they trust and that matters most to them, and where all people can enjoy fulfilling lives.

VALUES: Collaboration, Openness, Respect, Empowerment.

STRATEGIC PRIORITIES 2024/25:

➤ <i>Enhance care in our community and clinics</i>	➤ <i>Build trust and improve care with Aboriginal patients</i>
➤ <i>Optimise care in our hospitals</i>	➤ <i>Our people feel valued, trusted and inspired to deliver their best</i>
➤ <i>Enable people to live healthy and fulfilling lives</i>	➤ <i>Financial sustainability</i>

1. Acknowledgement to Country

The Board Chair provided the Acknowledgement to Country and paid respect to Aboriginal Elders past and present.

2. Attendance

Board Members:

MacLELLAN, Prof Donald	Board Chair
EBBECK, Mr Timothy	
HEALY, Mr Greg	
JENKINS, Dr Brent	
KING, Mr Robert	
WINTER, Ms Sarah	(via Teams)

Ex Officio:

CONSTABLE, Ms Jude	Acting Chief Executive
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Invitees:

STANBROOK-MASON, Ms Wendy	Acting Executive Director Acute Care Services
CRUICKSHANK, Mr Adam	District Director Community Wellbeing & Allied Health
ROSS, Mr James	District Director Finance and Corporate Services
WILKINSON, Ms Fiona	District Director Quality Strategy and Improvement
KNOX, Dr Matthew (via Teams)	Wyong Medical Staff Council Chair
WALTON, Dr Anne	Gosford Medical Staff Council Chair
DUERDEN, Mr David	Director Mental Health

Apologies

MUNRO, Dr Bill	Board Member
PICKERING, Ms Melissa	Acting District Director Nursing & Midwifery
SONTER, Mr Matthew	Aboriginal Health Partnership Advisory Council

In Attendance

PERSIANI, Ms Tracey	Board Secretariat (minutes)
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3. Declaration Of Interest – Nil.

4. Presentations:

4.1 Mental Health Deep Dive

Mr A Cruickshank informed the deep dive focus is on the areas of interest as requested by the Board which include the progress on the external review into the acute care service in Mental Health, the childhood and adolescent Mental Health services and the experience surveys for Mental Health consumers and carers. The Mental Health deep dive was first presented to the Board twelve months ago and highlighted some of the innovation of the service and also challenges with the recommendations that arose from the external review into Mental Health. The recommendations were quite extensive and it is a great opportunity to be able to provide an update to the Board on what has been achieved. The changes in the service have been as a result of the leadership and approach from Mr D. Duerden, Director Mental Health in helping to guide and steer the Mental Health leadership team and service through the period of change.

Mr D. Duerden, provided an update on the external review recommendations and key areas, the leadership approach and support, the staff and stakeholder engagement process and investment in culture change. The District strategic plan and annual priorities guided the development of a service plan for Mental Health which provided simple messaging to staff and to drive the external review recommendations.

Some key successes in 2023/24 include:

- Gosford Safehaven has been a great success with 1800 visits
- Wyong Safehaven receiving a grant to develop a first nations model
- Mental Health staff have stepped up particularly the leadership team showing great leadership skills and taking ownership of their budgets and FTE

Some key challenges for 2024/25 include:

- Establishing new programs such as Kids Head 2 Health Hub, first nations led Safehaven at Wyong, Mental Health help line through Health Direct as the state provider and opportunity to bring Primary Health Network (PHN) Mental Health line together as a trial on the Central Coast
- The new strategic plan incorporated into the Mental Health service plan and integration of the regional PHN mental health plan
- Future proof mental health through Hospital in the Home (HiTH) for mental health and maximise the beds we have to support the District 45,000 bed day goal
- Improving the experience for Aboriginal consumers
- Meeting the needs of people living with intellectual disability and mental health

Key learnings from Mental Health acute service external review included:

- Valuing our people – engaging staff, giving staff a voice, responsibility for decision making
- Referrals, clinical handover and patient flow – developing alternate pathways out of the acute care team
- Leadership, education and medical coverage – establish a Mental Health Director of Nursing
- Feedback to staff, multidisciplinary approach and psychological safety
- Governance, communication, benchmarking and sustainability – committee review and processes

Consumer feedback

The Your Experience of Service Survey (YES/CES) for consumers and carers overall result was 73%. The target is 80% report a very good or excellent overall experience which is very difficult to achieve. The number of consumers completing the survey saw a significant increase which was recognised by the Ministry of Health. A range of actions have been implemented from the feedback received.

Enhancing care in the community

- The Child & Adolescent Mental Health Services (CAMHS) service provide a range of prevention and early intervention services from 0 to 24 years of age including perinatal & infant mental health, school link partnership in school communities, north and south youth teams and aboriginal mental health.

- Patterns of activity have identified a 4% reduction in Mental Health presentations to emergency departments, a reduction in patients admitted to Wyong and Gosford Hospital with a range of enhancements such as SafeGuards, PACER and Kids Head to Health Hub which have assisted upstream in keeping patients out of hospital and assisting in reducing bed days.
- The Head 2 Health Kids service will commence in February 2025 which is a service for 0-12s intervening early for vulnerable families with a focus on Aboriginal health.

Board discussion following the deep dive included the challenges in peer worker experience for the Wyong Safehaven first nations model, patients navigating and linking to services for help via the SaveHavens, and the HiTH model for Mental Health including risk, staffing model, managing older patients and NDIS patients, managing patients from acute to HiTH, working closely with non-government organisations and acceptance of the model by consumers.

5. Patient Story

The patient story was introduced by Mr A. Cruickshank and was delivered via voice recording from the Mental Health team. The patient presented to Gosford Safe Haven in distress after a recent discharge from the inpatient mental health unit and had decided to come to the Safe Haven to get peer perspective for her current mental health needs. Peer workers shared lived experiences around strategies that had been helpful for them and the patient was thankful for this and found it helpful. The patient decided to work on their own strategies similar to the Safe Haven peer workers and added that they will now visit the Safe Haven from now on when they need mental health support before presenting to the emergency department. The patient thanked the peer workers and expressed their gratitude towards them.

6. Confirmation Of Minutes

The minutes of the meeting held on the 29 October 2024 were confirmed as a true and accurate record of the meeting.

7. Board Action Items

The Board Chair noted the following actions for submission to future meetings:

Action item 1: Mental Health Service Update - Update on Mental Health Service to be provided in November per Deep Dive Schedule. [Completed.](#) [Close off.](#)

Action item 2: People and Culture Terms of Reference – WH&S workers compensation and psychological safety strengthened focus to be included in terms of reference.

8 STRATEGIC MATTERS

8.1 Chairmans Report – November 2024

The Board Chairman's report was distributed with the Board meeting papers. The report was **noted** and taken as read. The following key points were discussed:

- Board member appointments and the Board self-evaluation results will be discussed in the *In-Camera* session.

8.2 Chief Executive Report on Strategic Priorities – November 2024

The Chief Executive Report was distributed in the Board meeting papers. The report was **noted** and taken as read. The Chief Executive discussed:

- Inability to retrieve data from the EDWARD system is impacting accessing performance results
- Activity remains moderate with an improvement in our access performance measures as a result, the complexities are quite challenging and is flowing to longer admissions and higher admission rate but despite that we are managing with reduced surge beds in use. Significant pressure point in surgical activity and trauma with an increase in overdue patients.
- Michael Swab has been appointed as the General Manager for Gosford and Woy Woy Hospitals.
- The District has had two attendances at the Special Commission of Inquiry regarding impact of NDIS and aged care patients to health services on 15 November 2024 and financial processes for allocating budgets on 19 November 2024.
- The District Leadership Forum was held on 20 November 2024 attended by approximately 80 senior leaders with a strong focus on the 45,000 days planning and implementing strategies.

Mr G. Healy requested an update on the recent closure of the Gosford Private Hospital birthing suite with the acting Chief Executive advising that the District will have the capability to manage and is currently working through recruitment to the Obstetrician and Gynaecology roster. An increase in the number of births is expected and manageable with the planned roster. Activity increase is anticipated from March 2025 onwards and will be monitored heading into planning for the next service agreement with the Ministry of Health.

Dr B. Jenkins raised the HiTH project and the timeframe expected to see an increase in patients to the program. Mr A. Cruickshank advised that the project is in the final stages and has identified opportunities to improve the referral pathway which will be finalised in the next few months and an implementation plan developed.

8.3 CCLHD Finance Report

The CCLHD Financial Performance Report was distributed with the Board meeting papers. The report was **noted** and taken as read. Mr J. Ross discussed:

- The General Managers presented at the Finance and Performance meeting on 25 November 2024 to discuss their contribution to the financial sustainability plan and strategies moving forward.
- A presentation on workers compensation was provided and is a challenging area for the District with significant financial impact if not managed properly.
- Streamlining of reporting to minimise duplication across the multiple reports.
- \$10.4 m received in the budget from the Ministry of Health reflecting actual activity and escalation for CPI adjustment. The strategy to focus on NWAU activity has been positive for the District.

8.4 CCLHD Performance Report

The CCLHD Performance Report was distributed in the Board meeting papers. The report was **noted** and taken as read. Ms F. Wilkinson discussed:

- There has been an improvement in access and unplanned readmission.
- The Board Chair conveyed that the new dashboard data is excellent.

9. BOARD SUBCOMMITTEE REPORTS

9.1 Health Care Quality Committee Key Messages

The Health Care Quality Committee Key Messages from the meeting held on 11 November 2024 were distributed in the Board Papers. **Noted** by the Board.

9.2 People and Culture Committee Key Messages

Nil meeting held.

9.3 Consumer and Community Committee Key Messages

Nil meeting held.

9.4 Medical & Dental Appointments Advisory Committee Key Messages

The Medical and Dental Appointment Advisory Committee Key Messages from the meeting held 14 October 2024 were distributed in the Board meeting papers. **Noted** by the Board.

9.5 Board Research Committee Key Messages

Nil meeting held.

10. OTHER REPORTS

10.1 Board Terms of Reference, Charter and Evaluation

The Board Terms of Reference were distributed in the Board meeting papers. **Endorsed** by the Board.

10.2 Annual Public Meeting Minutes

The Annual Public Meeting Minutes were distributed in the Board meeting papers. **Endorsed** by the Board.

11. COMPLIANCE MONITORING

11.1 Policy Directives (with specific Board responsibility) – Nil

12. CLINICIAN ENGAGEMENT

12.1 Medical Staff Council (MSC) Reports

Dr A. Walton, Gosford MSC Chair reported that the combined Gosford and Wyong Medical Staff Council meeting was held 26 November 2024 with the following matters raised:

- The Terms of Reference were endorsed and will incorporate the members of HiTH and Long Jetty Urgent Care Service as part of the Gosford MSC.
- Concern raised by clinician's regarding the current Obstetrician & Gynaecology services situation with an the MSC requesting an extraordinary meeting with the Executive to understand the context to date and work through as a group of senior clinicians with the Executive team.
- The current financial situation and potential impact on care delivery and how we balance the tension whilst protecting and supporting staff. A process is being built to be able to host business applications with a register to see what has been submitted which is key and important for transparency to improve trust. With the current financial climate and competing pressures there is a feeling that things could have been done differently and is a priority for members of the MSC.
- The VMO/SMO sports tournament has been successful and positive engagement.

Dr M. Knox, Wyong MSC Chair reported that a Royal North Shore MSC representative has been in contact regarding a conflict for land that had been earmarked for development for RNS which has switched over to create an apartment building. RNS is a tertiary referral for CCLHD and lack of access will adversely affect CCLHD. A letter of support for RNS MSC has been circulated to local politicians as a representation of individual clinicians.

13. COMMITTEE MEETING MINUTES

13.1 Finance & Performance Committee Minutes

The Finance and Performance Committee minutes from the meeting held on 28 October 2024 were distributed with the Board meeting papers. **Endorsed** by the Board.

13.2 Health Care Quality Committee – Minutes

The Health Care Quality Committee minutes from the meeting held on 14 October 2024 were distributed in the Board Papers. **Endorsed** by the Board.

13.3 People and Culture Committee – Minutes

Nil meeting held.

13.4 Medical and Dental Appointment Advisory Committee - Minutes

The Medical and Dental Appointment Advisory Committee minutes from the meeting held on 14 October 2024 were distributed in the Board meeting papers. **Endorsed** by the Board.

13.5 Board Research Committee – Minutes

Nil meeting held.

13.6 Consumer and Community Committee – Minutes

Nil meeting held.

13.7 Audit and Risk Committee – Minutes

Nil meeting held.

13.8 Clinical Council – Minutes

The Clinical Council minutes from the meeting held on 8 August 2024 were distributed in the Board meeting papers. **Endorsed** by the Board.

13.9 Aboriginal Health Partnership Advisory Council – Minutes

Nil meeting held.

14. New Business

Review of Board reports

The Acting Chief Executive raised whether a revised format was required for presenting the finance report, performance report and Chief Executive report at the Board meeting to avoid duplication of

information within the reports. The Board Chair requested feedback from the Board with agreement that the Chief Executive report should have a strategic focus on the priorities, issues, critical areas and key risks, written with a Chief Executive perspective to share with the Board. The new format for the performance report is due next month and a decision to be made following the next meeting on the performance report and finance report to be tabled as appendices for future meetings.

15. *In Camera* Session

There was *In Camera* session held following the Board meeting.

Meeting Close / Next Meeting:

The Board meeting closed at 7.24pm.

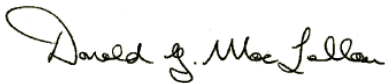
Next Meeting:

Tuesday, 17 December 2024 at 5.30pm
Gosford Hospital – Conference Centre

CERTIFIED AS A CORRECT RECORD

Professor Donald G MacLellan

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Name



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Signature

17 December 2024

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Date