

CCLHD BOARD MEETING

Date/Time: Tuesday 30 April 2024 – 5:30pm

Venue: Conference Room, Conference Centre, Gosford Hospital

VISION: Caring for the Coast encompasses delivering exceptional care and caring for our patients, community and staff.

VALUES: Collaboration, Openness, Respect, Empowerment.

STRATEGIC PRIORITIES 2023:

➤ <i>Timely Access to Care</i>	➤ <i>Create a great place to work</i>
➤ <i>High Quality, safe patient care</i>	➤ <i>Financial & Environmental Sustainability</i>
➤ <i>Deliver more Care in the community</i>	➤ <i>Planning for future growth</i>
➤ <i>Improve Aboriginal health outcomes and experience</i>	➤ <i>Building our digital health capability</i>

1. ACKNOWLEDGEMENT OF COUNTRY

Mr Greg Healy provided the Acknowledgement to Country and paid respect to Aboriginal Elders past and present.

2. WELCOME/ATTENDANCE/APOLOGIES

Board Members:

HEALY, Mr Greg	A/Board Chair
EBBECK, Mr Timothy	<i>Teams (5:30-7:00pm)</i>
FLINT, Mr Greg	
JENKINS, Dr Brent	<i>Teams</i>
KING, Mr Robert	
MUNRO, Dr Bill	
WINTER, Ms Sarah	

Ex Officio:

McLACHLAN, Mr Scott	Chief Executive
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Invitees:

BROOKES, Mr Martyn	Project Manager – Analytics and Business Intelligence Strategy Presentation <i>In attendance for presentations 4.1 and 4.2</i>
CONSTABLE, Ms Jude	Executive Director Acute Care Services
CRUICKSHANK, Mr Adam	District Director Community Wellbeing and Allied Health
DI-CANDILO, Mr Jason	A/Healthcare Improvement Specialist Program Manager – Our Path to Excellence <i>In attendance for presentations 4.1 and 4.2</i>

INGRAM, Dr Matthew	Wyong Medical Staff Council Chair
LYONS, Dr Nigel	Ministry of Health <i>In attendance for presentations 4.1 and 4.2</i>
ROSS, Mr James	District Director Finance and Corporate Services
SPOONER, Dr Nicolas	Medical Director Wyong Emergency Department <i>In attendance for presentations 4.1 and 4.2</i>
WALTON, Dr Anne	Gosford Medical Staff Council Chair
WILKINSON, Ms Fiona	District Director Quality, Strategy and Improvement

In attendance:

LAING, Ms Corinne Board Secretariat (*minutes*)

Apologies:

MacLELLAN, Prof Donald	Board Chair
LEVETT-JONES, Prof Tracy	Board Member
SONTER, Mr Matthew	Aboriginal Health Partnership Council Member

3. DECLARATION OF INTEREST – Nil.

4. PRESENTATIONS:

4.1 Our Path to Excellence Program Update

Dr N. Spooner and Mr J. Di-Candilo presented an in-depth overview of the work completed to date at completion of Round 3 of the “Our Path to Excellence” Program. The presentation focused on what the program is about, how it is progressing and what it is based on.

Mr J. Di-Candilo commenced the presentation and discussed the following:

- The aim of Our Path to Excellence is to build a foundation of new ways of working across the District.
- This foundation is:
 - Held together by strong collaboration. In the past we have seen across the District, services and disciplines existing in silos, working beside each other but not necessarily with each other to deliver their patient care.
 - Built on openness and respect creating an environment where everyone feels safe to raise issues and to voice things that they see that could be done better or to raise things that are not quite right instead of keeping those things to themselves.
 - A place where we raise people up and help them to be the best healthcare worker that they can be no matter their role or title.
 - Creates a benchmark for the way that we do things across the Central Coast, constantly striving for improvement and proud of the way that we work.
- 3 x 13-week cycles of the program have been completed, and currently nearing the end of a fourth. 40 teams across the District have been involved.
- At the completion of each cycle improvements within the ways of working have been seen within each team. While varying degrees of improvement exist across the teams, a shift has been created in how we work across the District.
- Changes in attitudes, beliefs, behaviour’s and habits have been seen, helping to push us forward in the Districts aspirations of becoming an improvement leader locally, nationally and internationally and creating an organisation of operational excellence.
- A report was provided to the Board in the meeting papers, highlighting some of the performance indicators and unit level improvements that have been made.
- The benefits that are harder to measure are the impacts on our staff of establishing ways of working based on collaboration, openness, respect and empowerment. A sample of some feedback from leaders of different services show the positive impact that this opportunity is having on them and the changes occurring that will help us achieve success in our community into the future.

Dr N. Spooner discussed the following:

- The background, journey, and vision of the Our Path to Excellence Program
- The social science behind the benefits of people coming together and creating their own vision and completing a task as a group, developing their own key performance indicators and how this helps to build the dynamics of effective teamwork.
- Our job as leaders in healthcare – we aim to “serve those who serve others” (*Referenced quote by Simon Sinek*). This can be achieved by giving staff the tools, structure and resources and the autonomy to serve.
- The military concept of decentralised command teaches us that as leaders if we want to win, we need everybody to be capable to lead and make decisions based on the “commander’s intent” and the “Vision”.
- The vision is created and the program then provides a framework, structure and common language to pursue process improvement, leadership, management and coaching, problem solving and resources to support change.
- Benefits within Wyong Emergency Department:
 - Changes to our ways of working by implementing a Visual Board and Multidisciplinary Team Huddles where the following is presented:
 - Clinical status/performance/pinch points
 - Problem section
 - Recognition of success
 - The visual check list present for all provides cognitive offload that empowers individuals to relax and critically think, because the comprehensive framework has been workshopped already.
 - Structure for leadership and multidisciplinary team huddle:
 - Any staff member can be a leader of the huddle – empowering subordinate leaders.
 - Problem solving tracking and transparency - problem solving actions are listed on team huddle boards.
 - Coaching and capability
 - Celebrating successes
- Situation awareness is escalated through appropriate channels as necessary.

4.2 Strategic Plan Development Update

Dr N. Lyons and Mr M. Brookes presented an in-depth overview on the development of the Strategic Plan. The summary provided in the Board papers was **noted** and taken as read.

The following was discussed:

- Strategic goal and drivers
- Our value-based care approach
- Priority strategies to deliver best outcomes at best value.
- Our approach to delivering change.
- The strategic plan is about focusing our resources on expanding on the best of what we currently do, and creating the capacity to do new things that we know will deliver outcomes that matter.

The Board discussed the goal, approach, structure and communication of the Strategic Plan and the Board Sub-Committees role in facilitating reporting and communication on strategies.

Action: [Strategic Plan to be presented to the Board at the meeting on 25 June 2024.](#)

5. PATIENT STORY

The patient story was introduced by Ms F. Wilkinson about a 71 year old lady who presented to Gosford ED after experiencing bleeding at home after having a cervical biopsy. The patient had been in Hospital in June this year for a large pulmonary embolism and had been on blood thinners since.

When presenting to ED, the patient felt reassured and thanked the Patient Experience Officer (PEO) in ED for her help with easing her anxiety and providing reassurance. The patient saw the triage nurse and then the Gynaecology team within an hour and was impressed with the fast action around her bleeding.

The patient was well communicated with and advised that her blood thinners would be stopped briefly and then restarted to assess if more bleeding occurred. If the bleeding restarted, she would have surgery. Unfortunately, the patient did have more bleeding and had surgery the following day. The surgery went well, and the nursing care afterwards was caring and respectful of the patient's dignity.

The patient wanted to pass on that from start to finish of her stay in hospital she can only praise the staff in ED, G5, theatres and recovery for their communication, care and skill.

6. CONFIRMATION OF MINUTES

The minutes of the meeting held on the 26 March 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: Foundation Business Case - Further update on the Foundation Business Case to be provided in May/June 2024.

Action item 2: Mental Health Service Update - Update on Mental Health Service to be provided mid-2024. Update to be provided at the Board meeting on 31 July 2024.

Action item 3: Unreported Plain X-Rays – Update to be provided at the Board meeting on 28 May 2024.

The Board Chair noted the following actions for discussion:

Action item 4: Our Path to Excellence Program Update - Update provided under agenda item 4.2.

Action completed.

8 STRATEGIC MATTERS

8.1 Chairmans Report

The Board Chairman's report was distributed with the Board meeting papers. The report was **noted** and taken as read.

The following items of information were provided in the report:

- **Special Commission of Inquiry into Healthcare Funding** - Commissioner Richard Beasley SC has been holding hearings across NSW for a number of months. The Chief Executive accompanied by the Board Chair and Ms. F. Wilkinson were invited to meet the Commissioner and his legal officers informally. Subsequently, further interviews took place and statements were provided to the Inquiry.

On Monday 15 April 2024, Ms. F. Wilkinson attended the Inquiry as a witness followed by the Chief Executive on Monday 22 April 2024. The Board Chair was called on 23 April 2024. All fielded extensive questioning on a range of topics over a 1–2-hour period. Amanda Larkin, former Chief Executive of South Western Sydney Local Health District (SWSLHD) who has been seconded to oversee the Inquiry on behalf of the Ministry of Health (MoH), has provided positive feedback about the District's participation at the Inquiry.

The Acting Board Chair invited the Chief Executive and Ms. F. Wilkinson to provide the Board with an update on the hearing in the Board Chair's absence. Dr N. Lyons provided brief context for the Board about the Special Commission, purpose of the inquiry and congratulated the District on how they presented at the hearing.

The Acting Board Chair congratulated the Chief Executive, Ms F. Wilkinson and Prof. Donald MacLellan on behalf of the District for their work in attending the inquiry.

8.2 Chief Executive Report on Strategic Priorities

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

- The District has seen positive developments throughout April 2024 including growth of community based services. The District's community care services delivered over 50,000 occasions of service since February 2024. Nearly 40% of those were delivered virtually.
- Challenges have arisen with the Hospital in the Home (HiTH) service and related services reaching full capacity and the District is focused on these.
- The peak in demand has decreased slightly in the past 4-6 weeks. Patient volumes are still challenging and being managed.
- The Our Path to Excellence Program has evolved into Phase 4 with the focus now on acute based services and community-based services will be a focus in phase 5.
- Current focus on hospital patient flow strategies and the Executive Director of Acute Care Services is focusing on access and improvement plans.
- The District's financial performance referenced in the financial reports.
- Significant improvement in timeliness of recruiting within the workforce. A significant number of junior doctors and junior nurses have been recruited and welcomed in recent months filling organisational vacancies.
- Focus on staff engagement and communication, development of new services and improvement of current services.
- Significant hand hygiene improvements.

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:

- Development of the Financial Recovery Plan for balance of 2024 and FY25 to address key drivers of the current financial result including FTE, rostering, bed utilisation and procurement, and looks to set clear targets, improve controls and support to return to a sustainable operating position.
- Key improvement strategies:
 - Affordable FTE
 - Affordable bed target – projects to commence.
 - Improvement in rostering practices
 - Affordable procurement
 - Revenue maximisation strategies
 - Reviewing budgets
- Following in-depth discussion at the April Board meeting about the District's tenuous financial position, the development of a financial recovery plan addressing the current issues and medium and longer term priorities for the balance of 2024 and FY25. The Board discussed the Districts Financial Recovery Plan including financial strategies and initiatives the District is taking to address issues, measures and expected outcomes.

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:

- Safety and Quality Indicator - Timely Access to Care: the increase in presentations is starting to decrease.
- NWAU – focus on educating and pursuing sustainable performance outcomes for the District.
- Any area underperforming has extensive strategies in place to focus on improvement.

Ms J. Constable discussed:

- TOC / ETP has been underperforming. Refreshing with each of teams, supporting them and their improvement strategies.

8.5 Our Path to Excellence Cycles 1-3 – Program Review and Outcomes

The briefing note and report were distributed in the Board meeting papers. The report was **noted** and taken as read.

9. BOARD SUBCOMMITTEE REPORTS

9.1 Health Care Quality Committee Key Messages

The Health Care Quality Committee Key Messages from the meeting held on 8 April 2024 were distributed in the Board Papers. **Noted** by the Board.

Mr G. Flint noted on behalf of the Board Chair that the committee is reviewing priorities for 2025 and aligning them to the Strategic Plan.

9.2 People and Culture Committee Key Messages

The People and Culture Committee Key Messages from the meeting held on 16 April 2024 were distributed in the Board Papers. **Noted** by the Board.

Mr R. King noted the following:

- The Workforce Plan that the District Director Workforce and Culture has created is exceptional and a positive trend in recruitment is emerging.
- The People Matters Employee Survey (PMES) actions are ongoing.
- The Board discussed the noted decrease in physical injuries and increase in psychological injuries, key factors and the importance of building workforce resilience and conducting performance management processes.

9.3 Consumer and Community Committee Key Messages

Nil key messages.

9.4 Medical & Dental Appointments Advisory Committee Key Messages

The Medical and Dental Appointment Advisory Committee Key Messages from the meeting held 4 March 2024 were distributed in the Board meeting papers. **Noted** by the Board.

9.5 Board Research Committee Key Messages

The Board Research Committee Key Messages from the meeting held on 9 April 2024 were distributed in the Board Papers. **Noted** by the Board.

Mr B. Jenkins noted the following:

- The District's Strategic Research Plan 2022-2026 is in its third year and significant achievements have been made in the previous two years.
- Aligning with the District's Strategic Plan will help reinvigorate and redirect efforts moving forward.
- Improved controls and reporting are in place for clinical trials resulting from a team effort between Finance and Research.

10. OTHER REPORTS – Nil.

11. COMPLIANCE MONITORING

11.1 Policy Directives with specific Board responsibility) – Nil

12. CLINICIAN ENGAGEMENT

12.1 Medical Staff Council Reports

Dr M. Ingram advised the Wyong Medical Staff Council meeting is on 7 May 2024 at 6:00pm. Board members and Executive Team members are welcome to attend. The Industrial Officer from the Australian Medical Association (AMA) will be attending to discuss the Visiting Medical Officer (VMO) Determination.

Dr A. Walton advised there will be discussion at both Medical Staff Council meetings around future service provision, service delivery and financial constraints.

13. COMMITTEE MEETING MINUTES

13.1 Finance & Performance Committee Minutes

The Finance and Performance Committee minutes from the meeting held on 25 March 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 11 March 2024 were Distributed in the Board Papers. **Endorsed** by the Board.

13.3 People and Culture Committee – Minutes

The People and Culture Committee minutes from the meeting held on 20 February 2024 were distributed in the Board meeting papers. **Endorsed** by the Board.

13.4 Medical and Dental Appointment Advisory Committee - Minutes

The Medical and Dental Appointment Advisory Committee minutes from the meeting held on 4 March 2024 were distributed in the Board meeting papers. **Endorsed** by the Board.

13.5 Board Research Committee – Minutes

The Board Research Committee minutes from the meeting held on 13 February 2024 were distributed in the Board meeting papers. **Endorsed** by the Board.

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 February 2024 were distributed in the Board meeting papers. **Endorsed** by the Board.

13.9 Aboriginal Health Partnership Advisory Council – Minutes

The Aboriginal Health Partnership Advisory Council minutes from the meeting held on 6 March 2024 were distributed in the Board meeting papers. **Endorsed** by the Board.

14. NEW BUSINESS

14.1 Long Jetty Urgent Care Service update

Dr B. Munro requested an update on the Long Jetty Urgent Care Service.

Mr A. Cruikshank discussed:

- Focus on improving the referral pathways through Health Direct. The benefit of patients coming through this pathway is that the patient receives a clinical

assessment, and the care is coordinated to the correct place (appropriate for Health Service or Emergency Department).

- The Ministry of Health escalated issues regarding referral pathways when the service commenced, and this has improved.
- Focus on recruitment of medical workforce due to gaps in medical roster.
- Increase in patients accessing the service, though not at full capacity.
- A significant impact has not been seen yet on the Emergency Department.
- CCLHD actively working with Ambulance NSW around other possible referral pathways.
- Clarification required for the public around what is acceptable for presentation.

15. In Camera Session

An In Camera session was not held following the Board meeting.

16. Appendix – Glossary – CCLHD Performance Report. **Noted by the Board.**

Meeting Close / Next Meeting:

The meeting closed at 7:45pm.

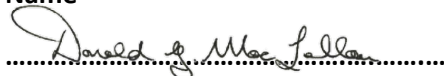
Next Meeting:

Tuesday, 28 May 2024 at 5.30pm

CERTIFIED AS A CORRECT RECORD

Prof. Donald MacLellan

Name



Signature

28 May 2024

Date