

Minutes CCLHD Board Meeting

Tuesday, 24 June 2025

Time: 5:30pm to 8:00pm

Venue: Gosford Hospital, Conference Room, Conference 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:

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

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)

CRENIGAN, Mr Phillip

EBBECK, Mr Timothy

KING, Mr Robert

KYD, Ms Jennelle

MUNRO, Dr Bill

SONTER, Mr Matthew

WARD, Ms Elizabeth

WINTER, Ms Sarah

Ex Officio:

McLACHLAN, Scott

Chief Executive

Invitees:

CONSTABLE, Jude

CRUICKSHANK, Mr Adam

ROSS, Mr James

PICKERING, Ms Melissa

KNOX, Dr Matthew

WALTON, Dr Anne

Executive Director Acute Care Services

District Director Community Wellbeing & Allied Health

District Director Finance and Corporate Services

Acting District Director Nursing & Midwifery

Wyong Medical Staff Council Chair

Gosford Medical Staff Council Chair (via MS Teams)

Apologies

STANBROOK-MASON, Wendy

District Director Nursing & Midwifery

In Attendance

CHANT, Dr Kerry

Chief Health Officer, NSW Ministry of Health

Office of the Deputy Secretary Population & Public Health

Senior Medical Advisors

Public Health Trainee (left after agenda item 4.1)

NATHAM, Dr Ned / SHARPE Dr Caroline

WEBSTER, Ms Christie

District Manager, Patient Access, Flow & Improvement
(left after agenda item 4.2)

PACKER, Mr Tim

PERSIANI, Ms Tracey

Board Secretariat (minutes)

3. Declaration Of Interest – Nil.

4. Presentations:

4.1 Dr Kerry Chant, Chief Health Officer and Deputy Secretary Population and Public Health, NSW Ministry of Health

Dr Chant attended to present to the Board on the 'Shift in approach to managing Population Health Priorities' speaking on the following key points:

- Modifiable risk factors are major contributors to the total burden of disease with the leading risk factors being overweight (including obesity), tobacco use, all dietary risks, high blood pressure, high blood plasma glucose, low birth weight and short gestation.
- Population growth, demographic changes and changes in disease burden are driving increasing demand for health services. Prevention is essential to meet growing demand and improve health.
- The NSW Health approach to prevention is to integrate prevention and population health activities into health service delivery to provide good clinical care, stronger focus on equity, support more effective inter-agency collaborations and small shifts at an individual level.
- A new approach to prevention in the Service Level Agreement focusing on a four-year horizon to achieve improvement in the proposed outcomes
- The District will choose up to three priority areas to focus on over the four-year horizon and prepare a Health Outcomes Action Plan with six-monthly monitoring and reporting against agreed measures in the plan.
- This approach will require a comprehensive and coordinated whole of organisation approach and effective partnerships with other stakeholders.

4.2 Timely Access to Care Deep Dive

Ms J. Constable, Executive Director Acute Care Services and Mr T. Packer, Manager Patient Flow presented the Timely Access to Care Deep Dive to the Board speaking on the following key points:

- The District is experiencing challenges impacting our capacity during this Winter period across the inpatient setting and in the community with a system under a lot of pressure. Patient access and flow is about the continuity of care with strategies focused on the acute care and community settings.
- The priorities under the Access Improvement Strategy are designed across key areas and to build a way, as is our strategic direction, to reduce the demand for beds and deliver care to the community in different ways and access is about supporting us to do that.
- Priorities in the last 12 months focused on patient flow benefits for both patients and staff to improve overall experience of care, system wide collaborative connection across all of our health care services, delivering things in parallel to achieve common goals and governance and oversight of the improvement strategies.
- The Access Improvement Strategy established three key goals – Out of Hospital focus, In Hospital focus and Emergency Department focus with system components and strategies in all of these areas.
- Challenges in the last 12 months include fragmented care coordination across services, complex discharges processes, over-reliance on inpatient care, recruitment and industrial landscape.
- Winter 2025 focus has been on staff wellbeing, transit lounge early utilisation, out of hospital care, increased virtual care, managing respiratory demand, new after-hours District Patient Flow Coordinators, focus on communication around patient flow and escalation, and implementation of the Discharge Patient Flow Concierge roles.
- Key community services supporting patient flow and access include Community Nursing, Hospital in the Home, Allied Health, Virtual Care & Triage and Urgent Care Services.
- Priorities for 2025/26 include focused strategies that align to measure against annual priorities - enhancing care in our community and clinics and optimising care in our hospitals, engagement with clinicians to maximise opportunities, building on practices that have shown success and keep an eye on the horizon for potential threats and opportunities.

5. **Patient Story**
The patient story was held over to the next meeting.
6. **Confirmation Of Minutes**
The minutes of the meeting held on the 27 May 2025 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 Update – due September.
- 8 **STRATEGIC MATTERS**
- 8.1 **Board Chair Report – June 2025**
The Board Chair report was provided in the Board meeting. The following key point was discussed:
- NAIDOC week commences 6 July to 13 July with Central Coast NAIDOC Community Day being held Tuesday 8 July 2025 with a range of activities including health screening which has been extended for all ages. The Board are welcome to attend.
- 8.2 **Chief Executive Report on Strategic Priorities – June 2025**
The Chief Executive Report was distributed in the Board meeting papers. The report was **noted** and taken as read. The Chief Executive discussed:
- The release of the State budget and the Board involvement in finalisation of the Service Level Agreement which will be a four year agreement with two components. The agreement is required to be signed and published on the District website by 31 July 2025.
 - The three Population and Public Health priority areas will be identified by the Executive Leadership team and presented to the Board
 - The Board acknowledged the Royal Australian and New Zealand College of Obstetricians and Gynaecologists (RANZCOG) reinstatement of Gosford Hospital's accreditation for obstetrics and gynaecology training and commended the staff involved and District on this achievement.
 - The Board acknowledged and recognised the efforts by Ms J. Constable in prioritising Endoscopy cases providing resourcing resulting in improvement and addressing the overdue category A cases.
- 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:
- Results remain positioned to achieve FY25 financial targets for expense, revenue and activity.
 - Seasonal activity pressures have continued in June with challenges continuing into the beginning of the next financial year.
 - Focus has been on performance and operational improvement.
 - Increased bad debt write offs has resulted following a change to recording methods.
 - Implementation of Private Health Insurance changes to support and optimise conversion.
- 8.4 **CCLHD Performance Report**
The CCLHD Performance Report was distributed in the Board meeting papers. The report was **noted** and taken as read.
- The Board acknowledged the improvement in falls rates which has been a collaboration with nursing and a multi-disciplinary approach supported by huddles to look at how we prevent from happening again.
9. **BOARD SUBCOMMITTEE REPORTS**
- 9.1 **Health Care Quality Committee Key Messages**
The Health Care Quality Committee Key Messages from the meeting held on 2 June 2025 were distributed in the Board Papers. **Noted** by the Board.
- 9.2 **People and Culture Committee Key Messages**
Nil meeting held.

9.3 Consumer Community Committee Key Messages

Nil meeting held.

9.4 Board Research Committee Key Messages

Nil meeting held.

10. OTHER REPORTS

10.1 Internal Audit and Risk Management Attestation Statement / Audit and Risk Committee Charter

The Internal Audit and Risk Management Attestation Statement / Audit and Risk Committee Charter were distributed in the Board meeting papers. The statement and charter were **Endorsed**.

10.2 Quarterly Enterprise-wide Risk Report

The Quarterly Enterprise-wide Risk Report was distributed in the Board meeting papers. The report was **noted** and taken as read.

The Board Chair reported that the Director Corporate Governance and Assurance is seeking feedback on the format and content of the report. The Board discussed and requested qualitative element and heat map.

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

- The combined MSC meeting has been timely particularly with current workloads and these events are important in contributing to protect our staff through the holding these types of social events and provides opportunities to build trust and engagement with medical staff.
- VMO/JMO sport social event program is continuing which contributes to a positive culture.
- Congratulations and acknowledgement for the reinstatement of the O&G accreditation.

Dr M. Knox, Wyong MSC Chair reported

- The combined MSC meeting was held recently and thanked the Board members who attended. The evening was very positive with a collegial presence and hope to reinvigorate the MSC social aspect to build culture. The obstetrics and gynaecology matter was discussed with no update for the Board.

13. COMMITTEE MEETING MINUTES

13.1 Finance and Performance Committee Minutes

The Finance and Performance Committee minutes from the meeting held on 26 May 2025 were distributed with the Board meeting papers. **Noted** by the Board.

13.2 Health Care Quality Committee – Minutes

The Health Care Quality Committee minutes from the meeting held on 14 April 2025 were distributed in the Board Papers. **Noted** 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 5 May 2025 were distributed in the Board meeting papers. **Noted** by the Board.

13.5 Board Research Committee – Minutes

Nil meeting held.

13.6 Consumer Community Committee – Minutes

Nil meeting held.

13.7 Audit and Risk Committee – Minutes

The Audit and Risk Committee minutes from the meeting held on 24 April 2025 were distributed in the Board Papers. **Noted** by the Board.

13.8 Clinical Council – Minutes

The Clinical Council minutes from the meeting held on 8 May 2025 were distributed in the Board meeting papers. **Noted** by the Board.

13.9 Aboriginal Health Partnership Advisory Council – Minutes

The Aboriginal Health Partnership Advisory Council minutes from the meeting held on 5 March 2025 were distributed in the Board meeting papers. **Noted** by the Board.

14. New Business

Board Chair End of Appointment

The Board Chair acknowledged the handover of the Board Chair role to Ms S. Winter who will Chair the next meeting to be held in August.

The Board members, Chief Executive and Executive Leadership team expressed their gratitude and acknowledged the contribution of the exiting Board Chair since his appointment in 2019.

15. In Camera Session

There was no *In Camera* session held.

Meeting Close / Next Meeting:

The Board meeting closed at 7:46 pm.

Next Meeting:

Tuesday, 29 July 2025 at 5.30pm
Wyong Hospital – Education Centre

CERTIFIED AS A CORRECT RECORD

Ms. Sarah Winter

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Name



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Signature

29 July 2025

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Date