

Minutes CCLHD Board Meeting

Tuesday, 25 February 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 provided by Mr Matthew Sonter.

The Board Chair welcomed and introduced the new Board members, Mr Matthew Sonter, Professor Jennelle Kyd, Ms Elizabeth Ward and Mr Philip Crenigan who all provided an overview of their background.

2. Attendance

Board Members:

MacLELLAN, Prof Donald
CRENIGAN, Mr Philip
EBBECK, Mr Timothy
KING, Mr Robert
KYD, Prof Jennelle
MUNRO, Dr Bill
SONTER, Mr Matthew
WARD, Ms Elizabeth
WINTER, Ms Sarah

Board Chair

via MS Teams

via MS Teams

via MS Teams (left at 7:06pm)

via MS Teams (left at 6:32pm)

Ex Officio:

CONSTABLE, Ms Jude

Acting Chief Executive

Invitees:

STANBROOK-MASON, Ms Wendy
CRUICKSHANK, Mr Adam
ROSS, Mr James
WILKINSON, Ms Fiona
PICKERING, Ms Melissa
KNOX, Dr Matthew
KESTEL, Ms Bonnie

Acting Executive Director Acute Care Services
District Director Community Wellbeing and Allied Health
District Director Finance and Corporate Services
District Director Quality Strategy and Improvement
Acting District Director Nursing and Midwifery
Wyong Medical Staff Council Chair
District Director People and Culture

Apologies

WALTON, Dr Anne

Gosford Medical Staff Council Chair

In Attendance

PERSIANI, Ms Tracey

Board Secretariat (*minutes*)

3. Declaration Of Interest – Nil.

4. Presentation

4.1 People and Culture Deep Dive

Ms B. Kestel, District Director People and Culture presented a deep dive to the Board focusing on the strategic plan in particular the priorities of 'build trust and improve care with Aboriginal patients' and 'our people feel valued, trusted and inspired to deliver their best'.

The People and Culture plan was shared with the Board. The plan underpins the strategic plan for the District. There has been significant contribution to the plan from senior leaders, staff, the Executive Leadership team, and People and Culture Board sub-committee. The plan will be used to promote our strategic priority with staff in terms of feeling truly valued in the work they do and trusted in terms of our culture and how we treat each other, and most importantly inspired to do our best every day.

The plan is focused on supporting our people through the five pillars of leadership, culture, capability, staff experience, and workforce insights.

Ms Kestel acknowledged the Corporate Communications team for their involvement and design work.

Some key achievements:

- Proud of the newly created People and Culture Leadership team who will drive change moving forward and the 2024 PMES data for the People and Culture Directorate seeing a 12 point increase in engagement, 15 point increase in job purpose and enrichment and 23 point increase in action on survey.
- The District Leadership forums and a great branding for connection/alignment.
- SPARK Leadership program pilot which was very successful with two more cohorts to commence.
- People and Culture Plan alignment with NSW Health CORE values and Culture & Staff Experience framework.
- 1,892 student placements in nursing and midwifery, medicine and allied health.
- Consistent top performer in state Time to Fill KPI.
- Stronger ATF governance positively impacted FTE control.
- Aboriginal workforce participation increased by 0.23% in 2024, to 3.6% of total workforce participation (target 4.9% by 2028).
- Appointment of Aboriginal Workforce Development team.

Some key challenges:

- Developing frontline leadership capability at scale.
- Culture change which will need a consistent focus and investment.
- Senior stakeholder engagement to ensure strategic alignment.
- Visibility of learning across the District for synergies and to reduce duplication.
- HealthRoster audits and benchmarking peer LHDs to drive manager accountability.

Looking forward:

- Promoting the People and Culture Plan and Aboriginal Health and Workforce Plan.
- Leadership development, CORE Values program and bespoke programs.
- PMES action on survey and recognition.
- Implement Culture & Staff experience framework.
- Increase number of Aboriginal identified and targeted positions.
- Comprehensive learning needs analysis.
- HealthRoster best practice to ensure cost management.

Ms B. Kestel raised questions with the Board throughout the presentation which prompted discussion regarding building a culture of trust, communication/feedback loop and consideration process to provide transparency, simplifying processes, individual roles and responsibilities to contribute to outcomes.

The Board acknowledged and thanked Ms Kestel for the content of the deep dive and tremendous work from the People and Culture team.

5. Patient Story

The patient story was introduced by Mr Adam Cruikshank, District Director Community Wellbeing and Allied Health, and was delivered via voice recording from the Women, Children and Families team. The patient story told of the journey of a patient who engaged the Midwifery Group Practice service and publicly funded home birthing service. The story highlighted the valuable role our Midwives play and the valued relationship that continuity of midwifery care provides throughout the pregnancy home birth experience.

6. Confirmation Of Minutes

The minutes of the meeting held on the 17 December 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: People and Culture Terms of Reference – refer to agenda item 10.2

Action item 2: Central Coast Research Structure – update to be provided to March Board meeting.

8 STRATEGIC MATTERS

8.1 Chairmans Report – February 2025

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 representation on the Board sub-committees has been finalised.
- Ms Sarah Winter appointed Deputy Chair replacing outgoing Board member Mr Greg Healy.

8.2 Chief Executive Report on Strategic Priorities – February 2025

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

- This is the last Board meeting as acting Chief Executive with the Chief Executive Mr. S McLachlan due to return from the Ministry of Health secondment in March. Ms J. Constable acknowledged and thanked the Board for their support. The Board acknowledged Ms J. Constable for the seamless transition between the Chief Executives, her outstanding performance, improvement across the District and leadership skills during this time.
- Ms F. Wilkinson, District Director Quality Strategy and Improvement has accepted a secondment with Health Infrastructure and is a great opportunity. During this time the allocation of portfolios within Quality Strategy and Improvement directorate will be temporarily transferred to other directorates.
- The Obstetrician and Gynaecology (O&G) service has seen the appointment of two Head of Department positions, appointment of two Staff Specialists, career medical officers and unaccredited trainees to fill rosters. RANZCOG visit is likely in April to review our accreditation status. An independent external review of the O&G service has been confirmed.
- A \$10.4M enhancement received end of December 2024 to cover significant areas to support the District strategy across a range of services.
- Dr. Munro raised the current situation of the surgical waitlist in endoscopy and overdue Category 1 procedures. Ms J. Constable reported that the matter has been escalated on the District risk register and investing in additional resources, reviewing structured plans that are in place and looking at additional opportunities to manage.

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 District remains in a position to achieve an on target budget outcome in FY25 which has been supported by a combination of activity moderation, bed usage and governance controls implemented.
- A \$10.4M enhancement has been received to be distributed across approximately 20 services to support the District strategic plan.

- The premises at 67 Holden Street is to be demolished with an agreement for this to be undertaken by the developer of an adjacent construction project and will occupy the area whilst this construction occurs.
- A \$700K enhancement has been received for EV upgrades and other funding for Paediatric Palliative care and Women, Children's & Families service.

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:

- Strategic KPIs are at the front of the report followed by the Ministry of Health Service Agreement KPIs.
- The score card in the Service Agreement KPIs contains a focus column. Any KPI that is identified in the focus column with graph needs a closer look, with commentary provided by the relevant team and action for improvement.
- Recommendation from the Finance and Performance Committee for a glossary to define definitions for strategic KPIs will be actioned.
- The Board acknowledged the quality and improvements with the new performance report format which concentrates on areas that require focus.

9. BOARD SUBCOMMITTEE REPORTS

9.1 Health Care Quality Committee Key Messages

The Health Care Quality Committee Key Messages from the meeting held on 18 February 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 and Community Committee Key Messages

The Consumer and Community Committee Key Messages from the meeting held on 11 February 2025 were distributed in the Board Papers. **Noted** by the Board.

9.4 Medical & Dental Appointments Advisory Committee Key Messages

The Medical and Dental Appointment Advisory Committee Key Messages from the meeting held 2 December 2025 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 18 February 2025 were distributed in the Board meeting papers. **Noted** by the Board.

10. OTHER REPORTS

10.1 CCLHD Board Report July to September 2024

The CCLHD Board Report was distributed in the Board meeting papers. The report was **noted** and taken as read.

10.2 People and Culture Terms of Reference

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

11. COMPLIANCE MONITORING

11.1 Organisational Risk Report

The CCLHD Performance Report was distributed in the Board meeting papers. The report was **noted** and taken as read. The Board acknowledged the changes occurring with the report with a presentation to the Board meeting in March which will include the risk appetite statement. The acting Chief Executive also noted the changes in risk review by the Executive Leadership team who provide direction which is a positive maturing of risk discussions, record risks and build an understanding.

11.2 Policy Directives (with specific Board responsibility) – Nil

12. CLINICIAN ENGAGEMENT

12.1 Medical Staff Council (MSC) Reports

Dr A. Walton, Gosford MSC Chair was an apology and provided a written report that was distributed to the Board. The report was **noted** and taken as read.

Dr M. Knox, Wyong MSC Chair reported:

- Commitment to senior medical officer engagement and communication opportunities through MSCs.
- Outpatient services presentations from HITH and VCAT with MSC working to spread word about these services to drive and support the 45k day strategy.
- Consensus letter drafted from MSCs to support JMOs in clinical decision making.

13. COMMITTEE MEETING MINUTES

13.1 Finance and Performance Committee Minutes

The Finance and Performance Committee minutes from the meeting held on 16 December 2024 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 9 December 2024 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 2 December 2024 were distributed in the Board meeting papers. **Noted** by the Board.

13.5 Research Committee – Minutes

The Board Research Committee minutes from the meeting held on 10 December 2024 were distributed in the Board Papers. **Noted** by the Board.

13.6 Consumer and Community Committee – Minutes

The Consumer and Community Committee minutes from the meeting held on 13 December 2024 were distributed in the Board Papers. **Noted** by the Board.

13.7 Audit and Risk Committee – Minutes

The Audit and Risk Committee minutes from the meeting held on 17 October 2024 were distributed in the Board Papers. **Noted** by the Board.

13.8 Clinical Council – Minutes

The Clinical Council minutes from the meeting held on 12 December 2024 were distributed in the Board meeting papers. **Noted** by the Board.

13.9 Aboriginal Health Partnership Advisory Council – Minutes

Nil meeting held.

14. New Business

Nil

15. *In Camera* Session

There was no *In Camera* session held following the Board meeting.

Meeting Close / Next Meeting:

The Board meeting closed at 7:35 pm.

Next Meeting:

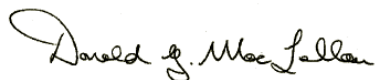
Tuesday, 25 March 2025 at 5.30pm

Wyong Hospital – Conference Room, Education Centre

CERTIFIED AS A CORRECT RECORD

Professor Donald G. MacLellan

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Name



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Signature

25 March 2025

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Date