

## Minutes CCLHD Board Meeting

Tuesday, 27 May 2025

**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>

- Acknowledgement to Country**  
Mr Matthew Sonter provided the Acknowledgement to Country. The Board Chair acknowledged Reconciliation Week and Sorry Day.
- Attendance**  
**Board Members:**  
MacLELLAN, Prof. Donald                      Board Chair  
EBBECK, Mr Timothy  
KING, Mr Robert  
MUNRO, Dr Bill (*via MS Teams*)  
SONTER, Mr Matthew  
WARD, Ms Elizabeth  
WINTER, Ms Sarah  
  
**Ex Officio:**  
McLACHLAN, Scott                      Chief Executive  
  
**Invitees:**  
CONSTABLE, Jude                      Executive Director Acute Care Services  
CRUICKSHANK, Mr Adam              District Director Community Wellbeing and Allied Health  
ROSS, Mr James                      District Director Finance and Corporate Services  
STANBROOK-MASON, Wendy           District Director Nursing and Midwifery  
KNOX, Dr Matthew                      Wyong Medical Staff Council Chair (*via MS Teams*)  
WALTON, Dr Anne                      Gosford Medical Staff Council Chair (*via MS Teams – joined 6:10pm*)  
  
**Apologies**  
CRENIGAN, Mr Philip  
KYD, Prof. Jennelle  
  
**In Attendance**  
PERSIANI, Ms Tracey                      Board Secretariat (*minutes*)

### **3. Declaration Of Interest – Nil.**

### **4. Presentation:**

#### **4.1 Digital Health Service Deep Dive**

The Digital Health Service deep dive was distributed with the Board meeting papers. The deep dive was **noted** and taken as read.

The Chief Digital Health Officer provided an update to the Board on the implementation of the Single Digital Patient Record (SDPR) program and progress of the Digital Strategy Roadmap 2021-2026 (the strategy).

The District is four years into the five year strategy which is an opportune time with the digital transformation with SDPR program as well as digital health generally.

The Remote Patient Monitoring pilot which is an initiative of the strategy received very positive feedback following the evaluation, although some challenges have been identified requiring investigation to determine a full roll out of the program.

There have been a range of eMR enhancements to the current system including building documentation and bespoke solutions. The latest project is an electronic Controlled Drug Register across all Pharmacy departments which will deliver a secure, standardised and real-time solution that enhances regulatory compliance, streamlines workflows and reduces medication-related risk.

SDPR program is governed under a separate entity headed by a Chief Executive and Board. A governance structure is in place that reports to the SDPR Authority. The SDPR Authority also has a Chief Legal Officer working with the Ministry of Health legal team to look at all the system functionalities. Clinical governance oversight sits with the configuration groups with large representation from CCLHD.

SDPR is a very large implementation program with a significant quantity of modules within the scope including existing regular modules i.e. ambulatory care, inpatients with the addition of specialist care modules such as anaesthetics and emergency departments.

The District is scheduled to Go-live in November 2026 as part of Tranche B which will involve being part of the pilot moving from the Cerner platform to the epic platform. A key risk in the implementation of SDPR is the District's preparedness to turn the system on. Additionally, there will be an impact to our staff and resourcing which will require a change to practice and system training across the District.

A detailed device audit will occur in all wards to identify SDPR device requirements. SDPR will provide an increased range of mobility access and reporting.

Focusing back on the strategy, adoption of the NSW Health Grade Enterprise Network (HGEN) scheme which provides a sustainable methodology to be able to refresh network infrastructure assets has allowed earlier scheduling of the Wyong Hospital Wi-Fi network uplift.

The strengthening of Cyber Security capabilities include Microsoft Bitlocker hard drive encryption to new and existing computers, Essential 8 end of life software and hardware replacements, further technical security enhancements to block malicious activity and restricted browser extension control.

The Digital Health Service is well aligned and positioned to manage the changes that are expected to come in future years in the digital health environment.

### **5. Patient Story**

The patient story was introduced by Mr A. Cruickshank and was delivered via voice recording from the Wyong Mental Health Acute Care Team Manager. The patient is a mental health consumer in the community and is an example of how a collaborative health team helped to coordinate, escalate and provide a high level of care to a mental health consumer.

### **6. Confirmation Of Minutes**

The minutes of the meeting held on the 29 April 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 2025.

## 8 STRATEGIC MATTERS

### 8.1 Chair Report – May 2025

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

- The Board Chair attended the National Volunteer breakfast celebrating the Districts volunteers and acknowledged their tremendous work and commitment in supporting our patients.

### 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 increased winter demand has been challenging in both Gosford and Wyong Hospitals with additional surge beds open.
- Recent flooding event has had some impact particularly with evacuation of aged care and retirement village residents.
- The electrical shutdown scheduled for 10 May went smoothly and was completed earlier than expected.
- Quarterly performance meeting with the Ministry of Health (MoH) resulted in positive feedback and the District remaining on level 1 performance.
- Surge waitlist reduction has seen some challenges with planning to manage and focus towards gynaecology.
- The Special Commission of Inquiry (SCOI) into Healthcare Funding report has been released with 41 recommendations.

Board discussion was held regarding the MoH Emergency Department Triage 3 review, the Health Bites series and links to the Podcast as well as engaging other networks, opportunities for weekend discharges via telehealth and overall staff fatigue and wellbeing.

### 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:

- Focus on FY26 forward estimates planning and saving strategies.
- FY26 Service Agreement session between the District and MoH has been held with key topics raised.
- It is anticipated that the SDPR project will sit as a financial and performance reporting risk until completion of the program implementation.

### 8.4 CCLHD Performance Report

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

- Average Length of Stay (ALOS), maintenance and Aged Care patients are impacting patient flow and being monitored.

## 9. BOARD SUBCOMMITTEE REPORTS

### 9.1 Health Care Quality Committee Key Messages

Nil meeting held.

### 9.2 People and Culture Committee Key Messages

Nil meeting held.

### 9.3 Consumer Community Committee Key Messages

The Consumer Community Committee key messages from the meeting held on 13 May 2025 were distributed in the Board Papers. **Noted** by the Board.

The Committee discussion focused on the key objective of better engagement with the community and service diverse needs. The Committee was briefed on a vaccination program that was very innovative working with TAFE and aged care facilities with real learnings and how the program can reach further participants.

#### **9.4 Board Research Committee Key Messages**

The Board Research Committee key messages from the meeting held 6 May 2025 were distributed in the Board meeting papers. **Noted** by the Board.

#### **10. OTHER REPORTS**

##### **10.1 Risk Appetite Statement**

The Risk Appetite Statement was distributed with the Board meeting papers for endorsement. **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

- 60 staff engaged in the follow up for the gynaecology service external review.
- Acuity has increased requiring surge beds with this linking in with inefficiencies with patients in lots of locations requiring ongoing work to look at these inefficiencies as services are stretched across the District.

Dr M. Knox, Wyong MSC Chair reported

- The combined MSC meeting will be held Thursday 28 May 2025.
- Dr Knox provided a presentation to the Board on the formation of the Sustainable Healthcare team. District Sustainable Healthcare Clinical Lead positions have been created (0.4 senior medical and 0.25 nursing) at Gosford and Wyong Hospitals as part of a 12-month trial. The roles will look at inefficiencies to save money and emissions and work to embed these efficiency savings ongoing into clinical practice and sustainability projects. Six monthly reviews will be undertaken to prove the effectiveness of the team.

#### **13. COMMITTEE MEETING MINUTES**

##### **13.1 Finance and Performance Committee Minutes**

The Finance and Performance Committee minutes from the meeting held on 29 April 2025 were distributed with the Board meeting papers. **Noted** by the Board.

##### **13.2 Health Care Quality Committee – Minutes**

Nil meeting held.

##### **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 7 April 2025 were distributed in the Board meeting papers. **Noted** by the Board.

##### **13.5 Board Research Committee – Minutes**

The Board Research Committee minutes from the meeting held on 18 February 2025 were distributed in the Board Papers. **Noted** by the Board.

##### **13.6 Consumer Community Committee – Minutes**

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

##### **13.7 Audit and Risk Committee – Minutes**

Nil meeting held.

**13.8 Clinical Council – Minutes**

The Clinical Council minutes from the meeting held on 13 February 2025 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**

**Executive/Board Leader Rounding Session**

As part of the Executive and Board leader rounding, the Environmental Services unit was visited to gain a deeper understanding of its operations. The unit, which comprises approximately 700 staff members plays a critical and often underappreciated role in ensuring the hospital's overall functionality. The visit highlighted issues, including a high vacancy rate and staff turnover which impact on operational efficiency. The unit provides essential services to the operations of the hospital and face many challenges that warrant support from leadership.

**15. *In Camera* Session**

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

**Meeting Close / Next Meeting:**

The Board meeting closed at 7:45 pm.

**Next Meeting:**

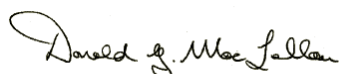
Tuesday, 24 June 2025 at 5.30pm

Gosford Hospital – Conference Centre

**CERTIFIED AS A CORRECT RECORD**

Prof. Donald G. Maclellan

.....  
**Name**



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**Signature**

24 June 2025

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**Date**