

Minutes CCLHD Board Meeting

Tuesday, 23 September 2025

Time: 5:30pm to 8:00pm

Venue: Wyong 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 2025/26:

➤ <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

Mr M. Sonter provided the Acknowledgement to Country.

2. Attendance

Board Members:

KYD, Prof Jennelle	Acting Board Chair
CRENIGAN, Mr Philp	
EBBECK, Mr Timothy	
KING, Mr Robert	
MUNRO, Dr Bill (via MS Teams)	
SONTER, Mr Matthew (via MS Teams)	
WARD, Ms Elizabeth	

Ex Officio:

McLACHLAN, Scott	Chief Executive
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Invitees:

CONSTABLE, Jude	Executive Director Acute Care Services
CRUICKSHANK, Mr Adam	District Director Community Wellbeing & Allied Health
ROSS, Mr James	District Director Finance and Corporate Services
STANBROOK-MASON, Wendy	District Director Nursing & Midwifery
WALTON, Dr Anne	Gosford Medical Staff Council Chair (via MS Teams joined 5:53pm)

Apologies

WINTER, Ms Sarah	Board Chair
KNOX, Dr Matthew	Wyong Medical Staff Council Chair

In Attendance

HILL, Ms Lynelle	Director Women, Children & Families
PERSIANI, Ms Tracey	Board Secretariat (minutes)

3. Declaration Of Interest – Nil.

4. Presentations:

4.1 Women, Children and Families' Service Plan 2025-2035

The Women, Children and Families Briefing Note and Service Plan were distributed in the Board meeting papers. Ms L. Hill, Director Women, Children and Families presented the Plan to the Board with the following discussed:

The District has developed the Women, Children and Families Service Plan 2025-2035 to guide and inform future service delivery requirements to meet future population demands. The 10 year plan aims to guide health service delivery across acute, outpatients and community settings, while acknowledging key partnerships with other NSW Health entities and external organisations.

The development of the plan included extensive community, consumer and clinician consultation, with over 900 responses to a community survey, 2 consumer focus groups, 40 individual consultations and 5 workshops. The Plan was informed by comprehensive background analysis, including review of historical and projected activity, population forecasts, policy frameworks, models of care, and both qualitative and quantitative data. The Women, Children and Families Directorate will lead the implementation of this plan.

It aligns with CCLHD's Strategic Plan and priorities and is guided by State and National frameworks such as the Speciality Capability Frameworks, Connecting, listening and responding: A Blueprint for Action – Maternity Care in NSW and the First 2000 Days.

The Plan aims to proactively respond to anticipated changes to the National Disability Insurance Scheme (NDIS), Closing the Gap, Violence Abuse and Neglect policy and other relevant NSW and Commonwealth policy directions.

Staging and phasing of each recommendation from the Plan will be shared with the relevant departments to prioritise and develop implementation plans with key deliverables and timeframes to deliver the change. These priorities will be monitored through an action plan and the District's reporting on annual priorities.

First key priorities and initiatives to action

- Explore the opportunity to establish a 23-hour Paediatric inpatient unit which can support elective day-only Paediatric Surgery and short stay unit at Wyong Hospital
- Explore and establish the opportunity to improve patient flow in the Maternity Services for elective procedures and planned care, minimising the impact to the Birth Unit and inpatient bed utilisation
- Improve continuity of care choices within the Maternity Services for all women regardless of complexity
- Operationalise the Wyong Women Outpatient Centre when ready for occupancy in November 2025, this will improve patient flow access to Gosford services and improve care closer to home for the 53% of women who travel from their homes in the North of the Central Coast for care.
- Review the Gynaecology Services, reduce surgical waitlist, strategies to improve outpatient access.

The Board raised the challenges and risks associated with delivering the Plan. Ms Hill reported that the most significant challenge will be implementing additional initiatives whilst managing day-to-day operational activity. To support this, an Improvement Manager will assist with implementation and provide support to the leadership team. The phased approach and detailed action plan have been developed to ensure the Plan remains on track. A business case will be presented to the Executive Leadership team to address resourcing needs.

The Women, Children and Families Service Plan 2025-2035 was **endorsed** by the Board.

5. Patient Story

The patient story was introduced by Ms W. Stanbrook-Mason and was delivered via voice recording from the Patient Safety team. The story was a really good example of the space and place that the SafeHaven model provides often for people when they are anxious or agitated before they come to our clinical areas and the support they are provided in these situations to receive care voluntarily and safely.

6. Confirmation Of Minutes

The minutes of the meeting held on the 26 August 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 – October meeting

Action item 2: Access Improvement Strategies – Rescheduled to November Board Planning Day

8 STRATEGIC MATTERS

8.1 Chair Report

The Chair Report was circulated separately prior to the Board meeting. The report was **noted** and taken as read. The Acting Chair discussed:

- The Acting Chair acknowledged the District on the Caring for the Coast and NSW Health Awards night, noting it was a very impressive event and heart warming to see the dedication of the staff and the work they are undertaking to improve health care for our community.

8.2 Chief Executive Report on Strategic Priorities – September 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 Chief Executive acknowledged the many staff who recently received their Years of Service awards with over 2900 staff that have served for more than 15 years.
- District escalated to Level 2 Performance with concern around timely access to care requiring a meeting with the Minister for Health which was supportive acknowledging the growing number of patients awaiting aged care and nursing staffing level challenges.
- August/September period has continued the sustained volume of complexity of patients and has now become the longest winter period seen in six years which is continuing to challenge our emergency departments and acute beds.
- Ms F. Wilkinson will be returning to the District Director Quality Strategy and Improvement role in January 2026 with current portfolio plans remaining in place until then.
- Ms J. Constable reported that an analysis of the surgical waitlist of the past four years has been undertaken to identify pressure points/challenges across specialty areas. A Surgery Improvement Manager role will investigate solutions and ongoing planning.

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:

- August financial results have been challenging with the forecast remaining at breakeven however should activity pressures be prolonged adjustments will be made accordingly.
- The District is working on \$16M of savings strategies.

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:

- Transfer of Care and Hospital Access Targets continue to report below target performance.
- Hospital Acquired Complications continue to perform to target for August 2025 however, Hospital acquired delirium has now breached into non-performing range on a rolling 12-month measurement used within the Service Agreement. A review of related data is to occur during September and an action plan is to be developed.
- Ms J. Constable has developed a summary outlining the focus of the access improvement plan which will be shared with the Board. A number of the strategies are medium to longer term, 6 to 12 months, with trajectories undertaken on where we will see initial improvement and results. It was recommended that these timeframes and results be included in the Performance report for the Board.

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 September 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 Enterprise-wide Risk Report

The Enterprise-wide risk report was distributed in the Board Papers. **Noted** by the Board.

The report has been adapted to meet the needs of the Board with feedback on the format to be provided to the Director Corporate Governance and Assurance out of session.

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 Caring for the Coast Awards was heart warming and a privilege to attend the event.
- The MSC terms of reference will be reviewed at the November meeting and will be an important opportunity to consider the best way to interact and engage with the Executive Leadership teams and Board.

Action: The Chief Executive recommended the Clinical Council Co-chairs attend the December meeting to update the Board.

13. COMMITTEE MEETING MINUTES

13.1 Finance and Performance Committee Minutes

The Finance and Performance Committee minutes from the meeting held on 25 August 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 11 August 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 4 August 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

Nil meeting held.

13.8 Clinical Council – Minutes

Nil meeting held.

13.9 Aboriginal Health Partnership Advisory Council – Minutes

The Aboriginal Health Partnership Advisory Council minutes from the meeting held on 4 June 2025 were distributed in the Board meeting papers. **Noted** by the Board.

14. New Business

Nil

15. *In Camera* Session

There was no *In Camera* session held.

Meeting Close / Next Meeting:

The Board meeting closed at 7:28pm.

Next Meeting:

Tuesday, 28 October 2025 at 5.30pm
Gosford Hospital – Conference Centre

CERTIFIED AS A CORRECT RECORD

Ms. Sarah Winter

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Name



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Signature

28 October 2025

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Date