

# Minutes for ISLHD Board Meeting and Annual Public Meeting

12/12/2022 | 02:00 PM - 05:00 PM - AEST

Kiama Pavilion

# Attendees (11)

Alan Hudson; Rod McMahon; Richard Morris; Janine Cullen; David Campbell; Chris Bertinshaw; Peter McDonald; Suzi Clapham; Nick Mitrevski; Jonathan Boswell; Jenny Collins

## Agenda

# **Annual Public Meeting**

The Board held the Annual Public Meeting at the Kiama Pavilion.

#### **ITEM 1: Welcome**

The Chair, Mr Chris Bertinshaw, declared the meeting open at 2.08pm and that a quorum was present.

# 1.1 Acknowledgement of Country

The Board Chair, Chris Bertinshaw acknowledged the Traditional Custodians of the land the Board were meeting on, specifically Dharawal Country. He paid respects to elders past present and future and extended that respect to Aboriginal and Torres Strait Islander peoples in the room. He expressed his desire to build trust in Aboriginal peoples living in and visiting the region.

#### 1.2 Attendance

Members:

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Mr Chris Bertinshaw, Board Chair

Ms Janine Cullen OAM, Deputy Chair

The Hon. David Campbell, Board Member

Dr Richard Morris AM. BM., Board Member

Dr Rodney McMahon, Board Member

Dr Jenny Collins, Board Member

Mr Nick Mitrevski, Board Member

Mr Jonathan Boswell, Board Member

Mr Peter McDonald, Board Member

In attendance:

Ms Margot Mains, Chief Executive

Ms Jessica De Angelis, Director, Office of the Chief Executive

Ms Angela Twist, Board Secretary (minutes).

In attendance for items 3.1

Mr Gerrard Golding, Executive Director Strategic Improvement Programs

Mr Zac Ribicic, Director Engineering and Asset Management.

## 1.3 Apologies

Dr Joshua Rijsdijk, Chair Northern Illawarra Medical Staff Council was an apology for this meeting.

#### 1.4 Declarations of Interests

There were no declarations of interests.

## ITEM 2: Business from the last meeting

#### 2.1 Confirmation of minutes

The minutes of the ISLHD board meeting held on 17 October 2022 were adopted as a true and accurate record.

#### 2.2 Actions Arising

The Board noted the action items arising.

#### **ITEM 3: Strategic Matters**

# 3.1 Presentation - Asset Management Budget Shortfall and Risk Assessment

The Board received a presentation from Mr Zac Ribicic, Director Engineering and Asset Management on the asset management budget shortfall and risk assessment.

Gerrard Golding, Executive Director Strategic Improvement Programs noted that the matter had come to the Board due to their obligations under the Work Health & Safety (WHS) Act. and that the presentation would give some further context to the recent uplift in incidents related to maintenance across the District. It was noted that the current condition and age of many assets poses a risk to the District, and while many of the calculations are educated guesses there is further condition report work to be done to confirm the amounts of investment required over the coming years.

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A question was asked about the quantity of maintenance required related to our statutory requirements and Mr Ribicic quoted approximately 20% of the maintenance as preventative and urgent.

It was discussed that the issue of maintenance funding has been escalated to the Ministry of Health (MoH) and this is not unexpected as they asked all local health districts to complete a Strategic Asset Maintenance Plan (SAMP) and an Asset Maintenance Plan (AMP) this year to better understand the condition of assets across the state.

The Board noted their serious concerns with the shortfall and strongly supported the Chief Executive approaching the Ministry of Health and NSW Treasury for additional funding.

ACTION 203/22: Gerrard Golding to provide guidance on content for letter of support from the Board to the Ministry regarding the maintenance funding request (Assignee(s): Gerrard Golding; Due Date: 16/12/2022)

## 3.2 MoH Quarterly Board Report

The Board discussed the quarterly Board report provided by the Ministry of Health and specifically queried the telehealth key performance indicator (KPI) and the District's performance in relation to same. The Chief Executive advised the KPI was noted as a stretch target by the Ministry, though the District was still aiming to meet it. Telehealth has declined slightly since the last COVID wave with many patients preferring the face to face interaction.

The Board were advised the Health Care Quality Committee receive regular reports on the District's performance against this KPI and would continue to monitor it.

#### **ITEM 4: For Decision**

#### 4.1 Committee Terms of Reference

**RESOLUTION 2022/84:** The Board approved the:

- 1. Finance and Workforce Performance Committee Terms of reference
- 2. Health Care Quality Committee Terms of Reference
- 3. Aboriginal Health Committee Terms of Reference.

### 4.2 Planning and Innovation Committee Transition

The Board discussed the proposed transition of the Planning and Innovation Committee (PIC) to the Research, Data and Environmental Sustainability Committee noting:

- planning documents currently being received by the PIC would be provided directly to the Board
- governance regarding data and research would be strengthened
- environmental sustainability will become a key focus of the Committee.

**RESOLUTION 2022/85:** The Board approved the transition of the Planning and Innovation Committee to the Research, Data and Environmental Sustainability Committee, while retaining the current membership.

## **ITEM 5: Committee Reports**

#### 5.1 Finance and Workforce Performance Committee

The Board noted the draft minutes and report of the Finance and Workforce Performance Committee meeting held 28 November 2022.

# 5.1.2 Annual Report

The Board noted the annual report.

# 5.2 Health Care Quality and Safety Committee

The Board noted the minutes and received the report of the meeting of the Health Care Quality and Safety Committee on 24 August 2022 and 28 September 2022.

### 5.2.1 Annual Report

The Board noted the annual report.

## 5.3 Planning and Innovation Committee

The Board:

- 1. noted the draft minutes from the meeting held 21 November 2022
- RESOLUTION 2022/83: endorsed the direction of the Obstetrics and Gynaecology Workforce Plan pending management's further review on the implementation options subject to funding (tab 5.3.1).

# 5.3.1 Obstetrics and Gynaecology Workforce Plan

### **5.4 Aboriginal Health Committee**

The Board noted the draft minutes and report of the Aboriginal Health Committee meeting held 21 November 2022.

## **5.4.1 Annual Report**

The Board noted the annual report.

# **ITEM 6: Board Chair Report**

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The Board Chair had no further additions to the reports provided.

# **ITEM 7: Chief Executive Report**

The Board noted the Chief Executive's report. They further discussed:

- the District's quarterly performance meeting and remaining at a level 2 due to the continuing issues regarding access and flow
- the focus on improving access and flow including the possibility of acquiring a second and get a second computed tomography (CT) scanner for the Wollongong Hospital
- the weekly financial performance meetings being held with the with core executive and general managers to identify saving opportunities
- the meeting held with Health Infrastructure regarding the recent population data which shows the new Shellharbour Hospital requires additional beds to keep up with demand
- the 150 cases of COVID-19 currently admitted to the District's hospitals and 60 furloughed staff
- the review of accommodation options to decant administrative staff from Port Kembla Hospital, given the original work with the government to create an administrative hub is no longer viable
- the request to the Ministry of Health for additional funds to undertake the agreed number of cardiothoracic surgery given the higher complexity of cases than originally anticipated.

The Chief Executive clarified that in regard to the number of full time equivalent (FTE) numbers versus positions for the Rural Health Workforce Incentives Scheme, position types may hold more than one FTE which is why there is a discrepancy between the numbers.

Following Board discussion, the Chief Executive clarified that maximum usage of our theatres is not always being attained in some areas most often due to staffing, specifically availability of anaesthetists, theatre nurses, beds available to take care of surgical patients and in some instances the locations themselves can only provide a limited complexity of procedures e.g. Milton.

ACTION 204/22: Chief Executive to send a position statement to the Board regarding the population planning and future concerns regarding the new Shellharbour Hospital. (Assignee(s): Chief Executive; Due Date: 27/02/2023)

ACTION 205/22: Chief Executive to present to the Board in February on the financial savings position. (Assignee(s): Chief Executive; Due Date: 27/02/2023)

ACTION 206/22: Chief Executive to provide an update on the radiology plans including future clinical leadership to the February board meeting. (Assignee(s): Chief Executive; Due Date: 27/02/2023)

#### **ITEM 8: For Information**

#### 8.1 Board and Committee Dates 2023

The Board discussed the 2023 Board and Committee dates, noting a change in time of the April 2023 Board meeting from 1.00pm to 4.00pm.

## **ITEM 9: Closure of General Meeting**

There being no further business, the Board Chair closed the meeting at 3.35pm.