

Minutes for ISLHD Board Meeting

03/05/2021 | 02:00 PM - 06:00 PM - AEST

Shoalhaven District Memorial Hospital Meeting Rooms

Attendees (12)

Denis King; Eve Bosak; Roger Downs; Kathy Eagar; Alan Hudson; William Lovegrove; Rod McMahon; William Pratt; John Stubbs; Gerard Sutton; Paul Knight; Richard Morris

Roger Downs was Acting Board Chair for this meeting while Denis King, Board Chair was on approved leave.

Agenda

Afternoon Tea with SHG Executive Staff

The Board had afternoon tea with the Shoalhaven Hospital Group Executive Staff.

ITEM 1: Presentation - Shoalhaven Hospital Group

Craig Hamer, General Manager, Shoalhaven Hospital Group acknowledged the traditional custodians of the land, the Yuin people and paid respects to elders past, present and future.

The Board received the presentation from Shoalhaven Hospital Group which commenced at 2.30pm and included information on the following topics.

Maternity, Obstetrics, Neonatal and Paediatrics

- registrars recruited to obstetrics for the first time
- 24/7 onsite registrar cover commencing 2022
- Submission to the Ministry to have the Neonatal Unit as Level 3 delineation.

Financial Operations

- Locally-developed “Finance for non-finance managers” course rolled out including train the trainer with finance managers in other hubs
- Four workshops held to date with a total of 25 attendees; one more scheduled for May
- 13 financial efficiency projects underway.

Projects

- physiotherapy practitioner in the emergency department (ED)
- quick access response team in ED
- speech pathology and dental services project which won a health innovation award. The project saw 72 per cent of patients maintain or improve their oral health during their hospital stay.

Corporate Services

- project coordination master builders award for the multi storey Hospital carpark
- security improvements and updated systems
- security audits completed for the hospital group
- code black plan has been finalised
- challenges recruiting security staff.

Workforce and Safety

- 71 per cent reduction in psychological injuries on last year
- Lost Time Injury Frequency Rate (LTIFR) will be a focus
- 36 SAVR nominations at District Awards ceremony
- 2 Aboriginal School Based Apprenticeship and Traineeship students commenced February 2021
- Appreciation calendar commenced with free coffees for medical staff on National Doctors Day, 30 March 2021.

Operations

- \$300k Karinya minor works refurbishment completed December 2020 (David Berry Hospital)
- Consumer representation on Master Planning and Clinical Services Planning meetings for hospital redevelopment
- Introducing best-practice immunoglobulin therapy (SCig) in the Shoalhaven Cancer Care Centre, leading to better patient outcomes, with potential for admission avoidance.

Nursing and Midwifery

- Telestroke service commenced 13 January 2021 with Prince of Wales as the referral site
- 128 BEFAST calls from 13 January until 8 April
- 4 patients received Thrombolysis (2 receiving tPA and Endovascular Clot Retrieval (ECR))
- 4 patients received Endovascular Clot Retrieval (ECR)
- Current average door to needle time for thrombolysis is 51 minutes (with some as quick as 37 minutes). This is the fastest Door to Needle time of the Telestroke service in NSW
- Falls prevention and management has been identified as one of the key risks.

Access and Flow

- Development of strategies to improve ED key performance indicators (KPI's) such as transfer of care (TOC) and admitted emergency treatment performance (ETP)
- Reviewing facilitated admits pathway
- Implementation of direct admission pathways for certain DRG's such as hip fractures.

Milton Ulladulla Hospital

- MUH Staff SAVR Awards winner (CE's Extraordinary Times Award)
- UHA SAVR Award Finalist
- The evolution of the SEED Wellbeing program

Medical Services

- Appointment of new HODs (Surgery, Anaesthetics, Paediatrics)
- Creation of new Orthopaedic, Geriatrics and Rehabilitation HOD positions
- Advancement of models of care leading to the redevelopment, pending "finalisation"
- Creation of a research hub, successful start-up resource from Research Central, bolstering significant local interest and expertise
- Collaborations with the University of Wollongong, University of Canberra and University of Auckland
- potential for a rehabilitation in the home program to reduce the reliance on admissions and improve patient outcomes.

The Board confirmed compliments are recorded in the IIMS system and commended the team for the wonderful progress made, particularly during such a difficult year. They queried how the Hospital Group deal with bullying and harassment claims and were advised of the 'speak up' program for staff to understand what constitutes bullying and are encouraged to report it. The General Manager advised he has a zero tolerance for bullying.

The Board thanked the staff for their impressive presentation.

ITEM 2: Welcome

The meeting opened at 3.24pm.

2.1 Acknowledgement of Country

The Chair acknowledged the traditional owners of the land on which the Board was meeting, the Yuin peoples, and paid respects to Elders past, present and emerging.

2.2 Attendance

Others in Attendance:

Ms Margot Mains, Chief Executive

Dr Kia Wallwork, Executive Officer

Ms Angela Twist, Board Secretary

Shoalhaven Hospital Group Staff Present for item 1 were:

Craig Hamer, General Manager SHG

Angela Jones, Maternity Lead / Operations Manager

Michael Pennisi, Finance Business Manager

Kate Andersen, Head of Discipline - Occupational Therapy

Jayne Carr, Corporate Services Manager

Rebecca Hoare, Workforce Support Manager

Jennifer Wright, Operations Manager Medical Care

Brad Scotcher, Director of Nursing

Karon Stalgis Deputy Director of Nursing

Stuart Emslie, Operations Manager / Director of Nursing Milton Ulladulla Hospital

Dylan Morduant, Director Medical Services

2.3 Apologies

Professor Denis King, Board Chair (approved leave)

Professor Bill Lovegrove, Board Member

Dr Josh Rijdsdijk, Northern Illawarra Hospital Group Medical Staff Council representative

ITEM 3: Declaration of interests

There were no conflicts of interest declared.

ITEM 4: Business from the last meeting

4.1 Minutes of the meeting on 12 April 2021

The Board approved the draft minutes of the meeting held 12 April 2021.

4.2 Action Items Arising

The Board noted progress and completion of actions.

4.3 Resolutions Register

Members received the Board resolutions of the previous 12 months and the progress to date.

ITEM 5: For Approval

5.1 MoH Allocated Risk – ISLHD Response

The Board received the report provided which was discussed at length at the Audit and Risk Committee (ARC). The Ministry of Health (MoH) approach for managing/reporting risks has changed which now sees local health districts (LHDs) review and report on selected system-wide risk statements.

The MoH will provide feedback to Chief Executives (CEs), Boards and ARCs on findings, controls and linkages to centrally owned system-wide activities and projects.

The ARC will consider and implement the appropriate reporting mechanisms.

RESOLUTION 2021/52: The Board endorsed the ISLHD response to Ministry of Health (MOH) System wide Risk statements prior to submission on 7 May 2021.

ITEM 6: Strategic Matters

6.1 League Table - Selected Performance Indicators by Local Health District & Network (February 2021)

The Board received the league table of selected performance indicators by local health districts (LHD) and Network and discussed the potential issue with the model, given the overall negative performance by most LHDs.

ITEM 7: Chief Executive's Report

The Board received the report provided by the Chief Executive (CE) and verbal updates noting:

- the Commonwealth Government will be intensifying their advertising of the COVOD vaccine
- media coverage and over 50s access to vax started today but it will ne phased.
- there has been no local transmission of COVID though a lot of overseas cases
- the District is currently vaccinating the families of port workers, NSW Police, State Emergency Service and patient facing workers
- the mass vaccination clinic will commence on 10 May 2021 and will use the Astra Zenica vaccination
- the very low numbers of attendances in the flu vaccination clinics.

The Board discussed vaccination hesitancy and the need to strongly evaluate all information.

The Chief Executive tabled a letter from Deborah Cox, Deputy Secretary, Patient Experience and System Performance, NSW Health advising the District is being escalated to performance level 2, following the sustained under performance in financial management and access indicators. Local Health Districts who are 4 per cent over budget will commence a more intensive review. ISLHD would be 5 per cent, though if considering the underlying, would be 0.7%. The financial analysis was completed without the inclusion of the COVID supplementation funds.

The letter stated 'At March 2021, ISLHD has 1006 overdue elective surgery patients' however the terms of the outsourcing targets from the Ministry had, at times, been amended.

The Board discussed the impossible task of meeting a target that constantly changes and the need to measure performance on clinical quality and safety, not only access and flow and finance. The Board strongly supported the Ministry visiting the District to evaluate and offering suggestions to improve performance.

The Board strongly supported the CE responding and challenging the underlying assertions in the letter and inviting the Ministry to provide the District with guidance on initiatives to meet the targets. The Chair, Audit and Risk will meet with the CE to discuss the corporate risk profile this has created for the District.

ACTION 183/21: Audit and Risk Chair to meet with the Chief Executive regarding the corporate risk issues the potential escalation to a level 2 has created for the District and particularly the constant amendments to financial targets.

(Assignee(s): Chief Executive; Due Date: 07/06/2021)

ITEM 8: Committee Reports (including Annual Reports)

8.1 Finance and Workforce Performance Committee

The Board received the minutes from the Finance and Workforce Performance Committee meetings held 22 February 2021 and 22 March 2021. The Committee Chair noted discussion points from the meeting held 26 April 2021:

- the action taken on incidents that have occurred i.e. electric shocks and falls
- the changes in the budget which the Executive Director Finance has undertaken to report on to the Ministry
- the district-wide improvement in personal effectiveness and development (PED) completion rates
- the continued work needed on the pathology and overtime financial sustainability programs.

8.2 Health Care Quality and Safety Committee

The Board receive the minutes of the Committee meetings on 24 February 2021 and 24 March 2021 and a verbal update from the Committee Chair of the meeting on 28 April 2021, noting:

- the presentation received on the Leading Better Value Care programs
- the roll out of the patient reported outcome and experience measures to some inpatient services and evaluation
- the new system HOPE which had issues initially but has been improved

- the falls presentation and the drive from the CE to achieve zero harm from falls including the balance between needing to mobilise frail elderly patients to prevent deconditioning and minimising falls, including supported assists.
- the potential systemic issue with discharge summaries not being received into the My Health Record
- the reduction in the nursing hours per patient bed day reporting frequency given it is also received by the Finance and Workforce Performance Committee.

8.3 Planning and Innovation Committee

The Board received the minutes of the meeting on 12 April 2021.

Audit and Risk Committee

The Board received a verbal update by the Committee Chair on the special Audit and Risk Committee (ARC) meeting held 15 April 2021 noting:

- the early close statements reviewed by the Committee
- the commendation of the accounts process
- the current exploration around intangible assets and the interrelationship with items such as intellectual property (IP). For example, the Centre for Health Research Illawarra Shoalhaven Population (CHRISP) is technically IP however there is currently no standard in place, which will be reviewed and reported back to the ARC.

Aboriginal Health Committee

The Board received a verbal update by the Committee Acting Chair on the Aboriginal Health Committee (AHC) meeting held 26 April 2021, noting:

- the report received on the drivers for the increase in low weight babies and concerns regarding the rate of smoking in pregnancy
- the emergency department (ED) outcomes and proposed exploration of potential links between individuals who do not wait and representations including whether the nature of the presentation affects the outcome
- the report on the aboriginal health strategy
- the 9 school-based trainees who commenced in February 2021 and are progressing very well. The hope to increase the number of those traineeship numbers in the future.
- the verbal update provided by the Chief Executive (CE) on the potential co-commissioning and meetings with the Public Health Network (PHN) and Aboriginal medical groups which is gaining traction.

ITEM 9: For Information

9.1 2021 Board Schedule

The Board received the information provided.

ITEM 10: Business Without Notice

There was no business without notice.

ITEM 11: Meeting Finalisation

ITEM 12: Closure of General Agenda

The general meeting closed at 4.30pm