

MINUTES OF THE MEETING OF THE NORTHERN NEW SOUTH WALES LOCAL HEALTH DISTRICT BOARD HELD ON WEDNESDAY 28 FEBRUARY AT GROUND FLOOR MEETING ROOM, CRAWFORD HOUSE, HUNTER STREET, LISMORE COMMENCING AT 9.00AM

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The Chair paid his respects to Aboriginal Elders, past and present, as the traditional owners of the land, being the Bundjalung Nation and thanked them for their custodianship of the land.

1. In-camera Session

No In-camera session was required.

2.1 PRESENT AND APOLOGIES:

Dr Brian Pezzutti, (Chair), Mr David Frazer, Mr Mark Humphries, Dr Joe Ogg, Dr Allan Tyson
Dr John Griffin, Ms Carolyn Byrne, Ms Deb Monaghan, Mr Michael Carter, Mr Pat Grier,

For part of meeting

Dr David Hutton, Director Clinical Governance

Mr Brett Skinner, Director Finance

Mr Ian McLeish, Acting General Manager Mental Health, Drug and Alcohol and Stream Services

Dr Richard Buss, Director Workforce

Mr Matt Long, Director Corporate Services

Ms Lynne Weir, Director Clinical Operations

Ms Katharine Duffy, Director Nursing, Midwifery and Aboriginal Health

Via videoconference:

Dr John Moran

Via teleconference

Nil

In Attendance: Mr Wayne Jones (Chief Executive)
Ms Jennifer Cleaver (Secretariat)
Ms Kate Greenwood (Secretariat)
Ms Corinne Martin (Acting Community Engagement Manager)

Apologies: Professor Susan Nancarrow, Ms Vicki Rose, Director Integrated Care and Allied Services

2.2 Declaration of Pecuniary and/or Conflicts of Interest

Dr John Moran declared a conflict of interest concerning Item 3.3 regarding the proposal to lease surplus ground at Casino Hospital to UCRH, as he has an appointment through UCRH/Sydney University as an educator.

2.3 Previous Minutes:

2.3.1 The Minutes of the Board Meeting held on 31 January 2018 as circulated were ENDORSED as a true and accurate record of the meeting with the following changes to Page 16 Paragraph 5 to now read 'Ms Byrne.....' instead of Mr Byrne.

Moved: Mr David Frazer

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Seconded: Dr Allan Tyson
CARRIED

2.3.2 Business Arising from the Minutes:

2.3.2.1 Dr Hutton is to seek input from the Health Care Quality Committee on the potential to categorise complaints and to provide feedback to the Board in due course.

The Board noted that Dr Hutton will provide feedback from the Health Care Quality Committee on the potential to categorise complaints data to the 28 March 2018 Board meeting.

ACTION:

Dr Hutton is to seek input from the Health Care Quality Committee on the potential to categorise complaints and to provide feedback to the 28 March 2018 Board meeting

2.3.2.2 Mr Jones is to provide an updated report on NSW LHD ETP and activity concerning the new strategies that are being implemented to improve LBH ETP figures for the two-month period between November – December to the 31 January 2018 Board Meeting.

The Board noted that Mr Jones will provide an updated report on NSW LHD ETP and activity strategies that are being implemented to improve LBH ETP performance to the April 2018 Board meeting.

ACTION:

Mr Jones is to provide an updated report on NSW LHD ETP and activity concerning the new strategies that are being implemented to improve LBH ETP performance to the April 2018 (2 May) Board Meeting.

2.3.2.3 Mr Jones is to provide an updated brief from Mr Matt Long, Director of Corporate Services on the management of volume storage of data for echo cardiographic records to the 28 February 2018 Board Meeting for consideration.

Mr Long spoke to the information contained in the brief and advised that TTH and LBH systems do have password protection and are backed up regularly.

Mr Long advised eHealth NSW LHD will conduct an assessment of the security arrangements for other clinical systems in the LHD during the remainder of 2018.

The Board suggested that while the brief addressed the security issues it did not address the volume storage concern. Discussion followed on the importance of being able to store these tests long term from a medico-legal perspective.

Dr Tyson raised his concerns with 'siloeing' of clinical information and the risks around the multiple hybrid systems operating within the LHD. Dr Tyson explained how the system ERIC does not communicate with CERNER EMR and the challenges this creates. Mr Jones acknowledged that as the State transitions to a complete EMR that the hybrid system in place does require governance and vigilance to reduce risks.

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Mr Jones also noted this issue was raised at the recent Rural eHealth meeting and he has discussed the matter with the Chair of the ERIC Steering Committee who indicated these issues will continue to be addressed to identify solutions.

The Board discussed the need for the LHD to determine, when new IT systems are being proposed by the Ministry of Health, whether they suit the future IT requirements of the LHD.

The Board noted the information contained in the brief.

ACTION:

Mr Wayne Jones is to request Mr Matt Long, Director Corporate Services to provide a brief for the Council of Board Chairs meeting scheduled on 19 March 2018 that outlines the current hybrid nature of the EMR in accessing patient information with information systems such as ERIC and CERNER EMR.

2.3.2.4 Mr Jones and Ms Lynne Weir to submit a report to the 28 February 2018 Board meeting on a framework surrounding operational roles and other avenues for issues to be addressed before being raised to the Board.

Ms Weir spoke to the information contained in the brief on the process for raising operational issues by NNSW LHD Board members.

Dr Ogg suggested that the operational channels for issues to be addressed before being raised at Board level, be incorporated into the Orientation for new Board members.

Mr Jones indicated that while staff should feel they can approach the Board members with any concerns, there needs to be a chain of management and any concerns they may have should be raised with their direct line manager first.

The Board noted the process outlined with a change to the final step now to read, "Director Clinical Operations reports back to the Board member *and* Chief Executive *and* when appropriate feedback is provided through a relevant Board committee"

ACTION:

Mr Jones is to ensure that frameworks surrounding operational roles and other avenues for issues to be addressed before being raised to the Board is to be included in the new Board Members Orientation program.

2.3.2.5 Mr Jones is to request Dr Richard Buss, Director of Workforce to provide a report on progress being made on the development of the NNSW LHD Cultural and Well-being Plan against the KPI's to the 28 March 2018 Board Meeting.

The Board noted Dr Richard Buss, Director Workforce will provide a report on progress being made on the development of the NNSW LHD Cultural and Well-Being Plan against KPI's to the 28 March 2018 Board meeting.

ACTION:

Mr Jones is to request Dr Richard Buss, Director of Workforce to provide a report on progress being made on the development of the NSW LHD Cultural and Well-being Plan against the KPI's to the 28 March 2018 Board Meeting.

2.3.2.6 Dr Alex Stephens, Director of Research will attend the 28 March 2018 Board meeting and present on his role as the Director of Research.

The Board noted that Dr Alex Stephens, Director of Research will be unable to attend the 28 March 2018 Board meeting due to previous commitments but will attend the 2 May 2018 Board meeting and present on his role as the Director of Research.

ACTION:

Dr Alex Stephens, Director of Research will attend the 2 May 2018 Board meeting and present on his role as the Director of Research.

2.3.2.7 Dr David Hutton is to provide a presentation to the 28 February 2018 Board Meeting on "Measurement for Quality Improvement for Board Members and Executives" released by the Clinical Excellence Commission (CEC).

Dr Hutton gave a presentation on the "Measurement for Quality Improvement for Board Members and Executives" released by the CEC.

Dr Hutton indicated the information he was presenting on related to the Clinical Governance Framework including governance structures, risk management and information for governance. He spoke to the value and challenges in using confidence intervals with clinical data sets.

Dr Hutton advised the key Safety and Quality Strategy documents include NSW LHD Safety and Quality account and the Quality and Safety Plan (under development) which provides assurance to the Board regarding implementation of strategies to address the Safety and Quality priorities as set by the Board.

It is proposed that the Quality Improvement Plan will include Patient Safety First, Leading Better Value Care, domains of the MOH's SPP Safety and Quality Framework, accreditation, mental health and building capacity for quality improvement.

The Chair advised the LHD had not received Health on a Page on local and State performance levels now for three months and noted the difficulty in providing appropriate governance without this data. Mr Jones responded he had raised this at the Performance Review meeting on the 9 February 2018 with Ms Susan Pearce, Deputy-Secretary Performance and Procurement and was advised that Health on a Page has been reviewed and the new format will be circulated in the next few weeks.

The Board Chair queried whether the general community would have an interest in knowing the number of audits undertaken during a one-month period within the LHD and suggested that an overview of the number of audits undertaken within the LHD be

included in the information provided at the Annual Stakeholders meeting at the end of 2018.

Dr Hutton advised the NNSW LHD Safety and Quality Plan is being developed as a high-level plan with governance oversight for implementation to be undertaken by the Health Care Quality Committee with approximately 24 strategies identified. There is to be six-monthly reporting on each strategy with a rolling schedule of four reports per meeting.

Dr Hutton tabled an example from the Hunter New England Health District of the Clinical Quality & Patient Care report for the Boards information.

Dr Moran spoke of the difficulty in implementing these measurements at a workforce level noting while there needs to be reflective practice, there also needs to be a balance between patient care and the staff having an understanding as to why these practices are so important

Mr Jones referred to the recent findings of the Coroner in the Michaela Perrin Inquest which acknowledged the considerable work that has already been undertaken by the LHD in rectifying matters that had been identified from the investigation.

The Chair noted the issues that had been raised around sepsis training and asked whether sepsis training is available to new graduate nursing staff.

General discussion followed about the importance of the information contained in the presentation and how it ties into the Cultural and Well-being Plan.

The Board thanked Dr Hutton for his comprehensive presentation.

ACTION:

Ms Katharine Duffy, Director Nursing, Midwifery and Aboriginal Health is to provide information on what sepsis training is available to new graduate nursing and midwifery staff to the 28 March 2018 Board meeting.

2.3.2.8 Mr Wayne Jones is to request Dr Richard Buss, Director of Workforce to provide a report containing the information that is readily available regarding statistics around the Employee Assistance Program (EAP) to the 28 February 2018 Board meeting.

Dr Buss spoke to the information contained in the brief outlining 286 clients (staff) accessed the EAP service and a total of 631 hours of services were provided in a 12-month period.

It was noted that a large percentage (84.4%) of clients who accessed the service were female and the average age of employees seeking assistance was 48 years.

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Dr Buss advised that the report is quite comprehensive and provides enough details for the NNSW LHD to feel confident in the EAP as a service provider.

The Board enquired why NNSW LHD engaged the current EAP provider and whether the provider is able to survey the LHD clients who access this service to seek feedback from the individual on their satisfaction level with the service.

ACTION:

Mr Jones to request Dr Richard Buss, Director Workforce to advise the reasons why the current EAP provider was engaged and whether the provider is able to survey the LHD clients who access this service to seek feedback from the individual on their satisfaction level with the service.

2.3.2.9 Mr Jones is to forward a copy of the 13 December 2017 NNSW LHD AGM minutes to the Hon. Brad Hazzard MP, Minister for Health.

The Board noted a copy of the 13 December 2017 NNSW LHD AGM minutes was sent to the Hon. Brad Hazzard MP

2.3.2.10 Letter of thanks to be written to Ms Maureen Lane, Director of Planning and Performance in recognition of 48 years of service to the NNSW LHD.

The Board noted the letter of thanks dated 31 January 2018 sent to Ms Maureen Lane, Director of Planning and Performance in recognition of 48 years of service to the NSW Health Service.

2.3.2.11 Letters of congratulations are to be drafted for the Board Chair's signature to Mr Robert Lagaida, Ms Cathryn Cox and Dr Karin Lines on the awarding of Public Service Medals.

The Board noted the letters of congratulations dated 31 January 2018 were sent to Mr Robert Lagaida, Ms Cathryn Cox and Dr Karin Lines on the awarding of Public Service Medals.

2.3.2.12 Mr Jones is to request Ms Lynne Weir, Director of Clinical Operations to provide a brief on the current procedures around Deteriorating Patients for 28 February 2018 Board meeting.

Ms Weir spoke to the information contained in the brief and the actions undertaken to improve compliance around the escalation of a deteriorating patient. Education around clinical reviews has increased substantially and though the rapid response figures have stayed the same, the number of cardiac arrests has reduced.

Ms Weir advised that while there are a number of wards/departments that are meeting the expectations of the organisation escalating care in 100% of cases, more work is underway across a number of wards/departments to reach the expected target.

It was noted that the NNSW LHD Clinical Governance Unit has approached the NSW

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CEC on a number of occasions to request comparison data on Rapid Response and Clinical Review. At present, there is no data available for comparison to be undertaken with data only available from the Health System Performance Report.

Ms Weir advised that Mr Ryan Armstrong, Nurse Unit Manager, The Tweed Hospital Medical 3 Ward presented his work on "Actions to avoid the slippery slope for a deteriorating patient" to the Clinical Operations Executive meeting on the 23 February 2018. The Clinical Operations and Nursing, Midwifery and Aboriginal Health Directorates are developing an implementation plan to roll out the strategies identified in Mr Armstrong's presentation across the District.

The Board noted the information contained in the brief.

2.3.2.13 Mr Jones is to ask Mr John Wickham, Medical Administration Manager to provide a Brief to the Board on the status of the VMO reappointments to the 28 March 2018 Board Meeting.

The Board noted Mr John Wickham, Medical Administration Manager will provide an updated brief to the Board on the status of the VMO re-appointments to the 28 March 2018 Board meeting.

ACTION:

Mr Jones is to ask Mr John Wickham, Medical Administration Manager to provide an updated Brief to the Board on the status of the VMO reappointments to the 28 March 2018 Board Meeting.

2.3.2.14 Mr Jones is to request Ms Katharine Duffy, Director of Nursing, Midwifery and Aboriginal Health to provide information on the systems that are in place for nursing and midwifery professional governance across the LHD.

Ms Duffy spoke to the information contained in the brief and the framework around the governance systems both within the LHD and how nursing and midwifery practice is governed at a State and national level.

Ms Duffy advised that all NNSW LHD nursing and midwifery staff do attend corporate and clinical orientation and in addition, wards and units have local orientation programs in place to induct new staff. New graduate nurses and midwives participate in a Transition to Practice program that is designed to support the new practitioner. All new practitioners are supervised by the Nurse Unit Manager/Maternity Unit Manager to ensure that their clinical practice meets the professional practice framework and relevant legislative and policy requirements.

Ms Duffy stated there are robust systems in place across the LHD and gaps in practice are addressed straight away with remedial action to support the practitioner in rectifying the gaps.

2.3.3 Other Matters Arising from the Minutes

There was no other matters arising from the minutes.

3. Matters for Decision

3.1 Clinician Action Engagement Plan

Mr Jones spoke to the information contained in the brief and proposed to move away from the Action Plan developed several years ago, and embed engagement as part of the reporting criteria for the Cultural and Well-being Steering Committee.

The Board gave approval for the Chair to provide a copy of the Clinician Action Engagement Plan to the Council of Board Chair's meeting scheduled on 19 March 2018.

The Board supported the transition reporting on clinician engagement from the current quarterly Action Plan updates to regular reporting through the Cultural and Well-being Steering Committee.

Mr Jones noted that reporting on clinician engagement is to be included in the Cultural and Well-being KPI's and will be presented to 2 May Board meeting.

Move: Dr Allan Tyson
Seconded: Ms Carolyn Byrne
CARRIED

3.2 Draft NNSW LHD Domestic and Family Violence Prevention and Response Action Plan 2018-2020

Mr Jones spoke to the information contained in the brief concerning the Draft NNSW LHD Domestic and Family Violence Prevention and Response Action Plan 2018-2020.

There was general discussion on the Draft Action Plan and how NNSWLHD addresses DV concerns.

The Board requested the following changes are made to the plan:

- Each page to be numbered
- Page 2 No 7 to now read "To *promote* domestic and family violence preventative education as part of the Local Health District's core business".
- Page 2 No 8 to now read "To ensure continuous quality improvement in domestic and family violence response and prevention *activity or actions*"
- Emergency Department Project should be highlighted to draw prominence to it.
- Lismore Women and Children's Refuge to now read ".....is committed to the empowerment of women and provides *for* women....."
- Closer consideration to the mapping of current services, internal and external partners to be undertaken including addition of Social Futures.
- Inclusion of reference to male victims

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General discussion followed around the significance of White Ribbon Accreditation. Mr Jones advised that this would be considered as part of NNSW LHD action plans going forward.

Dr Ogg suggested the development of 'an information bundle' for Domestic Violence victims which is easily accessible for staff to hand out. Mr Jones responded that Ms Ellie Saberi, Women's and Child Health Program Co-Ordinator has developed this type of package which could be more widely promoted.

Mr Frazer made reference to the broad definitions of DV and queried how some of these are captured in initial screening. Mr Jones replied that the training to clinicians on screening is based on the current definition.

Ms Monaghan drew the Board's attention to the Action Plan making no reference to Elder Abuse and asked that this be considered. Ms Monaghan asked whether Aboriginal DV victims are being referred to the Aboriginal Medical Services or Aboriginal Family Health Programs. Mr Jones advised he will follow-up to confirm both these issues and report back to Ms Monaghan directly.

The Board asked that the necessary changes are made and the amended NNSW LHD Domestic and Family Violence Prevention and Response Action Plan 2018-2020 will be re-submitted to a future Board meeting for the Board's consideration.

ACTION:

Mr Jones is to request Ms Vicki Rose, Director Integrated Care and Allied Health to facilitate the requested changes to the NNSW LHD Domestic and Family Violence Prevention and Response Action Plan 2018-2020 and respond to the Board's queries concerning Elder Abuse and Aboriginal DV victims and provide an updated plan to 2 May Board meeting for further consideration.

3.3 Proposal to lease surplus ground at Casino Hospital to University Centre for Rural Health (UCRH)

Mr Jones advised that UCRH is expanding its Allied Health under-graduate student numbers and is looking to purchase land on the Casino Hospital campus to build student accommodation.

Following discussion, the Board ENDORSED the proposal to lease 1200m² of surplus ground at Casino Hospital campus for UCRH-built student accommodation.

4. Chairman's Update

4.1 Chairman's Calendar

The Board Chair's calendar was noted particularly that he will be in Italy from the 20 June 2018.

5. Matters for Discussion

5.1 Chief Executive's Report

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Mr Jones referred to the issues that were covered in the Chief Executive's Report to the Board, which included:

5.1.1 Current and Significant Issues

- Clinician Engagement – Several meetings were held across the LHD including LBH Medical Staff Council, Mr Rob Nichols, TTH VMO regarding eBus progress, LBH Division of Medicine and Dr David McMasters, regarding paediatric services.
- Mr Jones together with Mr Thomas George MP, Member for Lismore welcomed the Nursing 2nd Year Specialty Training Program members and the LBH 2018 Intern Group.
- The Tweed Valley Hospital Site selection committee have finalised due diligence and the preferred site has been identified for the Tweed Valley Hospital. A report will be completed by the Committee by the 20 February 2018 and following consideration by the Executive Steering Committee it will be forwarded to the Minister for Health for discussion and/or an announcement.
- The first MOH Performance Review Meeting for 2018 when held on 9 February 2018, Ms Susan Pearce, Deputy-Secretary Performance and Procurement thanked the Executive and Board on the continued high performance against key performance indicators, noting that NSNW LHD maintained overall activity across the organisation despite the increase in winter activity.

While Ms Pearce was pleased overall with the ETP performance of the LHD, the ETP result for the LBH was raised. Ms Pearce was reassured by Mr Frazer that this is a standing issue for discussion at the Board and that strategies are being undertaken to lift the ETP results. Mr Jones request for support from MOH in undertaking a "deep dive" into the increased mental health activity across the LHD was supported.

5.1.2 Update on Strategic Issues

The Board Chair expressed his concern on the Deloitte Report being challenging to read.

5.1.3 Update on Strategic Plan Implementation

Nil for this meeting.

5.1.4 Matters for Approval

Following discussion, the Board ENDORSED the proposal to lease 1200m² of surplus ground at Casino Hospital campus for UCRH-built student accommodation.

5.1.5 Major Key Performance Indicators

- The Board noted that the results for Emergency Treatment Performance (ETP) during January 2018 was 80.8% against the target of 81%.
- Elective Surgery Access Performance (ESAP) Category 3 target was not met during January 2018. The results were as follows: Category 1, 100% against a target of 100%,

Category 2, 98.5% against a target of 97% and Category 3 was 95.7% against a target of 97%

- NNSW LHD met all triage targets. All triage categories were equal to or greater than the January 2017 results.
- The Transfer of Care result for January 2018 was 90% against a target of 90%.

5.1.6 Risk and Compliance Update

Nil for this meeting.

5.1.7 Governance Update

Mr Jones provided a verbal report on the Performance Review meeting held with MOH on the 9 February 2018 as set out in Item 5.1.1.

5.1.8 Capital Works/Planning Projects

- "Old" Byron Bay Hospital site – NNSW LHD is still advocating through the MOH for a commercial sale of the former Bryon Bay hospital site. NNSW LHD has received a copy of formal advice to Bryon Shire Council from the NSW MOH supporting the requested six-month extension for community consultation on potential future uses of the site. The Minister for Health met with community members on the 26 February 2018 at the former Byron Bay hospital site, where a productive discussion occurred as to the future use of the site.
- Campbell Hospital Remediation work – Mr Jones noted that correspondence has been forwarded to the MOH seeking financial support to progress with remediation work of the old site.
- Ambulatory Care Unit at Grafton Base Hospital – MOH will now progress this matter through the Treasury Funding process and upon endorsement the project will be formally handed over to Health Infrastructure to deliver on the commitment.

5.1.9 Matters for Noting

- Translational Research Grant Scheme – NNSW LHD has had two submissions to this highly competitive grant scheme accepted to proceed to full application. Whilst this is no guarantee of funding, the request to proceed to full application ensures a high probability of securing the requested funding.
Rural Research Capacity Building Program – NNSW LHD have had six applications approved in the recent round which is the highest number ever approved for a single Rural LHD in this program.
- Asset Facility Maintenance (AFM) On-line – NNSW LHD have commenced recruitment for dedicated staff to progress the implementation of the (AFM) on-line asset management system due to negotiations between NNSW LHD and the MOH Finance and Assets Branch not progressing.
- eMEDS Implementation – the NSW Government committed to fund the expansion of the eMEDS across NSW Hospitals. NNSW LHD have given eHealth an in principle agreement to expand the roll out of eMEDS to all NNSW LHD sites. To support this implementation, approximately \$1million will be sourced from the "growth funds" before the end of the 2018/19 financial year.

- Community First Responder Petition Coraki – the Board noted the progress being made with the Ambulance NSW and NSW Fire and Rescue and that contact will be made with Ms Linda Barney and Ms Patricia Hughes once formal arrangements have been progressed.
- Commonwealth Games – Workforce planning is underway to ensure availability of staff during the Games and reviewing potential transport challenges. Negotiations are underway with the MOH to ensure the NNSW LHD are compensated for costs associated with care provided for the “Games Family”.

5.1.10 Important Meetings/ Diary Commitments

The Hon. Brad Hazzard, Minister for Health and Minister for Medical Research visited NNSW LHD on 26 February 2018. Minister Hazzard visited a number of sites including Ballina District Hospital, the “old” Byron Bay Hospital site and LBH.

5.1.11 Questions for the Chief Executive without Notice

Mr Jones provided a verbal brief on a proposal to progress to the tendering of Medical Imaging Services with the LHD.

Mr Jones advised the Board that the document Key Management Personal Questionnaire that was due to be out by the 21 February 2018 is running late.

The Chair noted that there had be no feedback received from Ms Carrie Marr, Chief Executive Clinical Excellence Commission (CEC), regarding the Australian Council on Healthcare Standards document on clinical indicators and advised that he will raise this at the Council of Board Chair meeting to be held 19 March 2018. Mr Jones clarified that Ms Marr committed to convey the Boards concerns over the quality of the report.

The Board **ENDORSED** the Chief Executive’s Report.

Mr Pat Grier left the meeting.

5.2 Committee Minutes (discussed on exception basis otherwise noted)

5.2.1 Health Care Quality Committee (HCQC) – 13 February 2018

Dr Ogg, Chair, HCQC provided a verbal report of the HCQC Meeting held on 13 February 2018.

Dr Ogg briefed the Board on his concerns surrounding the current Agency for Clinical Innovation (ACI) Ortho-geriatric model of care and proposed the LHD move to a model where a patient has input from the Physician before as well as after theatre.

Following discussion on the management of the ACI model of care for fractured neck of femur pathway, the Board requested an update on the implementation of the pathway.

ACTION:

Mr Wayne Jones is to request Dr Hutton to provide advice on the management of the ACI model of care for fractured neck of femur pathway and advise of any roadblocks occurring in areas such as sub-acute and ED at The Tweed, Lismore Base and Grafton Base Hospitals and how are these being addressed.

The Board Chair queried the poor falls report results in the audit and Mr Jones responded that this is a priority area and there is a lot of work underway to address the management of falls.

The Board noted the HCQC Meeting Minutes of 13 February 2018.

5.2.2 Finance and Performance Committee (F&PC) – 21 February 2018.

Mr Humphries provided a verbal report of the F&PC meeting held 21 February 2018.

Mr Humphries noted that General Funds YTD \$0.029M unfavourable, with a forecast of \$0.0M favourable. It was noted that winter activity enhancement funding was received from MOH for \$3.322M and was distributed to facilities and line items in January.

Mr Humphries reported that Own Source Revenue results being General Funds YTD \$0.35M unfavourable (Dec \$0.179m unfavourable) with a forecast of \$2.0M unfavourable with Patient Fees and MAA/DVA activity showing a decrease.

Mr Humphries spoke of the recent improvements within the NNSW LHD Finance Directorate including the capturing of trending of significant issues and identified strategies to address these.

Dr Tyson noted the importance of ensuring that frontline staff have correct information in relation to the collecting of information from patients when they present to the hospital during the Commonwealth Games, particular around overseas health insurance.

The Board noted the F&PC meeting minutes of the 21 February 2018.

Mr Michael Carter left the meeting.

5.2.3 Medical and Dental Appointments Advisory (MDAAC) Committee – 8 February 2018.

Dr Tyson provided a verbal report of the MDAAC Meeting held on 8 February 2018.

Dr Tyson reported that there has been a recent appointment of an Infectious Disease Physician as well as the creation of a 24/7 Infectious Diseases Roster across the LHD.

Dr Tyson noted the LHD is ahead in relation to all VMO re-appointment processes and the formal report shall come to the 28 March Board 2018.

Mr Jones provided a verbal update on the progress of VMO reappointments across the LHD.

The Board noted the MDAAC Meeting Minutes of the 8 February 2018.

5.2.4 Health Services Development Committee (HSDC) – - 8 February 2018

The Board noted the HSDC meeting minutes will be submitted to the 28 March 2018 Board meeting.

5.2.5 Audit and Risk Committee (ARC)– next meeting 14 March 2018.

The Board noted the next Audit and Risk Committee meeting is the 14 March 2018.

5.2.6 Clinical Council (CC) – 6 February 2018

The Board noted the Clinical Council Meeting Minutes of the 6 February 2018.

5.2.7 Community Engagement Advisory Council (CEAC) – next meeting 19 March 2018

The Board noted the next CEAC meeting is scheduled on 19 March 2018.

5.2.8 Medical Staff Executive Council (MSEC) – date to be advised

The Board noted the next MSEC Meeting date is yet to be advised.

5.2.9 Aboriginal Partnership Meeting (APM) – next meeting 5 March 2018.

The Board noted the next meeting for the APM is to be held on the 5 March 2018.

5.2.10 Mental Health Forum (MHF) – 5 February 2018.

Ms Monaghan provided a verbal report of the MHF Meeting held on 5 February 2018.

Ms Monaghan advised that the Seclusion and Restraint Report was discussed in detail and a further recommendation added concerning streamlining the complaints process.

The forum will receive an update from Ms Moira Waters, Planning & Performance Officer following her attendance at a workshop to ensure that the LHD is developing its plan in line with the soon to be released NSW Mental Health Strategic Plan.

The Board approved the Chair's request to provide a copy of the Mental Health Forum meeting minutes dated 5 February 2018 to the next Mental Health Commission Community Advisory Council meeting on 7 March 2018.

Mr Jones advised the Board that the LHD is expecting a formal response from the MOH on the 19 recommendations arising from the Seclusion and Restraint Review Report. Upon receipt of the MoH response an implementation plan will be drafted and provided to the Board for information.

Mr Frazer indicated the issue was raised of paying some volunteers for meetings/events attended on behalf of the LHD. Mr Frazer advised of the potential implications of such a proposal and that this issue may also apply to CEAC volunteers. Mr Jones responded that he will request Ms Corinne Martin, Acting Community and Engagement Officer to submit an updated brief addressing this request to the 28 March 2018 Board meeting for consideration.

ACTION:

Mr Jones is to request Ms Corinne Martin, Acting Community and Engagement Officer to provide an updated brief addressing the issue of paying volunteers to the 28 March 2018 Board meeting for consideration.

The Board noted the MHF Meeting Minutes of the 5 February 2018.

5.2.11 Health Education Workforce Research Forum

The Board noted the Health Education Workforce Research Forum has been replaced by the NNSWLHD Research Strategic Advisory Committee 5.2.13

5.2.12 Drug and Alcohol Community Advisory Committee (DACAC) – 8 February 2018

The Board noted the DACAC meeting minutes dated the 8 February 2018.

The Board approved the Chair's request to provide a copy of the Drug and Alcohol Community Advisory Committee minutes dated 8 February 2018 to the Council of Board Chair's Mental Health Commission meeting to be held on 7 March 2018.

5.2.13 Research Strategic Advisory Committee (RSAC) – 13 February 2018

The Board noted the Research Strategic Advisory Committee minutes dated 13 February 2018.

Mr Jones commended the work being undertaken in relation to research under the guidance of Professor Nancarrow and Dr Ogg.

6. Matters for Noting/Information (discussed only on exception basis)

6.1 Major correspondence

There was no major correspondence for noting.

6.2 NSW LHD Seal

There were no items requiring the NNSWLHD Seal to be applied.

6.3 Updated Board Calendar

The Board noted the updated 2018 Board Calendar and the cancellation of the Combined Board meeting with NCPHN 28 February 2018 which will be re-scheduled following confirmation of a suitable date.

6.4 Other matters for noting

6.4.1 Letter of thanks to Dr Chris Gavaghan.

The Board noted the letter of thanks that was forwarded to Dr Chris Gavaghan dated 2 February 2018.

7. Meeting Finalisation

MINUTES OF THE MEETING OF THE NORTHERN NEW SOUTH WALES LOCAL HEALTH DISTRICT BOARD HELD ON WEDNESDAY 28 FEBRUARY AT GROUND FLOOR MEETING ROOM, CRAWFORD HOUSE, HUNTER STREET, LISMORE COMMENCING AT 9.00AM

7.1 Next Meeting

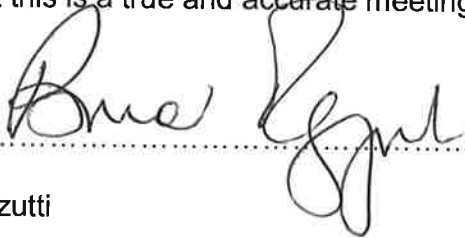
28 March 2018 Murwillumbah Hospital
9.00am – 1.00pm

7.2 Meeting closed

There being no further official business, the Chair declared the meeting closed at 2.20pm.

I declare that this is a true and accurate meeting record.

Signed



Date

10/3/18

Dr Brian Pezzutti
Chair

Northern NSW Local Health District Board