Page 1 of 10

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, Dr Allan Tyson, Mr Michael Carter, Dr John Griffin, Mr Mark Humphries, Ms Carolyn Byrne, Mr Peter Carter, Ms Naree Hancock, Dr John Moran, Mr Pat Grier, Ms Deb Monaghan, Professor Susan Nancarrow

In Attendance:

Mr Wayne Jones, Chief Executive,

Mr Ged May, Community Engagement Manager

Ms Jenny Cleaver (Secretariat)

Ms Kate Greenwood (Secretariat)

Dr Richard Buss Director Workforce (part of meeting)

Mr Dennis Pfitzner Manager Cultural and Well-being (part of meeting)

Mr Dan Madden General Manager, Grafton Base Hospital (part of meeting)

Ms Alison Renwick (Workforce Planner) (part-of meeting)

Via Teleconference:

Nil

Apologies:

Dr Alasdair Arthur

2.2 Declaration of Pecuniary and/or Conflicts of Interest

Mr Humphries declared a conflict of interest due to his recent appointments to TAFE NSW Regional Advisory Committee and Rescue Helicopter Service Committee.

2.3 Previous Minutes:

2.3.1 The Minutes of the Board Meeting held on 30 January 2019 as circulated were ENDORSED as a true and accurate record.

Moved:

Mr Mark Humphries

Seconded: Ms Carolyn Byrne

CARRIED

2.3.1.1The Minutes of the NNSW LHD and NCPHN Combined Board Meeting held on 31 October 2018 as circulated were ENDORSED as a true and accurate record.

Moved:

Dr John Moran

Seconded: Ms Deb Monaghan

CARRIED

Page 2 of 10

2.3.2 Business Arising from the Minutes:

2.3.2.1 Mr Jones to submit a report on the number of presentations and re-presentations of patients to NNSW LHD Emergency Departments to the 27 February 2019 Board meeting.

Mr Jones spoke to the information in the brief advising the major areas of re-presentations for the Local Health District are for Categories 4 and 5 at 67%.

General discussion followed around the difficulty in patients securing an appointment with local GPs for follow up after their initial presentation and treatment at the local Emergency Department (ED) and whether co-locating GP services within the ED would assist to better manage patients who re-present with primary health care needs.

Mr Jones advised that work is underway with the North Coast Primary Health Network (NCPHN) around the rural medical workforce as well as work being undertaken with the Regional Training Program at Grafton and Lismore to develop work models that support the GP/ED interface. The Board requested it receive an update to the 30 October 2019 Board meeting.

The Chair also noted that he has requested the Chief Executive to request Dr David Hutton, Director Clinical Governance to obtain clarification from the Agency for Clinical Innovation and the Clinical Excellence Commission (CEC) on quality indicators for unplanned readmissions presenting for the same reason.

2.3.2.2 Mr Jones is to provide a brief on clinician-to-clinician transfer of care and the chain of command to escalate concerns during handover to the 27 February 2019 Board meeting.

Mr Jones gave an overview of the information in the brief affirming the CEC recommending the use of ISBAR (Introduction, Situation, Background, Assessment, Recommendation) as a communication tool for clinical handover. It was noted that feedback from JMO's regarding ISBAR has been very successful.

The current focus is the transfer of care between the acute and primary care centre in which NNSW LHD is recognised as a lead agency.

2.3.2.3 Mr Jones is to provide a brief on what Mental Health Services are being provided across the LHD including services that are provided in conjunction with other organisations to the 27 February 2019 Board meeting.

Mr Jones advised work will commence with the NCPHN to promote these services as they broker or directly manage some of the NGO supports listed in the brief, with focus on the Clarence to ensure the community is aware of services and information available.

General discussion followed on the gaps recognised in the 0-12 age bracket for mental health services across the LHD noting that work is underway to address this gap.

The Board requested that it receives a Brief on mental health specific funding for staff

Page 3 of 10

including the Clarence area for the 2019/20 mental health budget, Mr Jones advised this would not be available until the April 2019 Board meeting.

ACTION:

Mr Jones is to provide a brief on mental health specific funding for staff including in the Clarence area for the 2019/20 mental health budget for the 29 May 2019 Board meeting.

The Board noted the brief on Mental Health Service provision requires amendment around services provided by Social Futures and Headspace.

2.3.2.4 Mr Jones is to provide a report on feedback on the number of Mental Health First Aid Programs currently undertaken across NNSW LHD to the 27 February 2019 Board meeting.

Mr Jones advised that Mental Health First Aid Programs across the LHD are quite comprehensive but will be transitioned to resident educators in the near future to ensure this is an ongoing program.

2.3.2.5 Mr Jones is to provide an update report on the implementation of the People Matters Survey Local Action Plans (PMES) and Mr Dennis Pfitzner, Culture and Wellbeing Manager is to attend the 27 February 2019 Board meeting.

Dr Buss reported that several issues that were raised in the People Matter Survey results are being addressed through the Culture and Well-being Plan that sits in the remit of the NNSW LHD Strategic Workforce Plan. Each LHD site now has an Action Plan to address specific issues that were raised in the People Matters Survey results.

Mr Pfitzner provided an update on the development of the local action plans promoting local problem solving, addressing site challenges and encouraging employee involvement. Consultation on the Action Plans had included staff forums and communiques, staff bar-b-ques, morning teas and feedback mailboxes.

Workforce has implemented several projects from the action plans across the LHD including management rounding, regular staff forums, staff representative Committee and in-services sessions. The LHD has committed to improve the exit interview processes, review the staff appraisal tools and LHD orientation process.

The next PMES is scheduled for June/July 2019 with the evaluation of these results to be processed and compared to the previous year.

Mr Dan Madden, General Manager Grafton Base and Maclean Hospitals outlined to the Board how the Clarence Cultural Plan was designed based on the PMES results. Key strategies for this plan include team dynamics, procedural feedback, organisational communication and individual resilience.

The Board discussed aspects of the work being undertaken in the Clarence including the difference between performance based management and bullying in the workplace. Dr

Page 4 of 10

Buss advised of two future staff appointments that will assist to educate staff on bullying and harassment and augmenting this with psychological well-being management skills.

Following discussion around the importance of leadership training for middle-management and Nursing Unit Managers, the Board invited Ms Katharine Duffy, Director of Nursing, Midwifery and Aboriginal Health to present to a future Board meeting on the work being undertaken around strategic planning, research and Nursing Unit Management development and education.

ACTION:

Mr Jones to invite Ms Katharine Duffy, Director Nursing, Midwifery and Aboriginal Health to present on work being undertaken around strategic planning, research and NUM development and education to the 26 June 2019 Board meeting.

The Board asked to receive quarterly reports updates on implementation of Local Action Plans.

Mr Jones responded to a query regarding the possible establishment of a Workforce Sub-committee and advised that this will be addressed in the brief on future Board Sub-Committees at the 1 May 2019 Board meeting.

2.3.2.6 Mr Jones is to provide an update report on the progress of the SERCO jail in relation to the NNSW LHD to the 27 March 2019 Board meeting.

Mr Madden advised SERCO has appointed a Health Service Manager who will commence in March 2019 and a meeting will be scheduled in April 2019 to further discuss the relationship with the correctional facility and the LHD.

The Board noted the brief.

2.3.2.7 Mr Jones is to provide a brief on areas of demand risk and unmet need based on geographical consideration across the LHD to the 27 March 2019 Board meeting.

This will be submitted to the 27 March 2019 Board meeting.

ACTION:

Mr Jones is to provide a brief on areas of demand risk and unmet need based on geographical consideration across the LHD to the 27 March 2019 Board meeting.

2.3.2.8 Mr Jones to circulate the Shared Investment Strategy paper to the Board via email.

The Board noted the Shared Investment Strategy was circulated via email on 11 February 2019.

2.3.2.9 Mr Jones to provide an update on the latest results for mental health patients in Emergency Departments over 24 hours, and a brief on how the LHD is tracking with the seclusion and restraint review recommendations to the 27 February 2019

Page 5 of 10

Board meeting.

Mr Jones spoke to the information in the brief acknowledging the changes that have been implemented in the Lismore Base Hospital ED that have resulted in a dramatic improvement in mental health patient flow in ED.

Mr Jones reported that Mental Health Services have embraced the seclusion and restraint recommendations, and while there is still some progress required in some areas, there has been a marked improvement and commitment to patient safety.

The Report was noted.

2.3.2 Other Matters Arising from the Minutes

The Chair reported on his recent announcement to the Bonalbo community regarding the imminent commencement of sufficient General Practitioners to allow the opening of the acute beds at Bonalbo Multipurpose Service.

3. Matters for Decision

Nil matters for decision

4. Chairman's Update

4.1 Chairman's Calendar

The Board noted the Chairman's Calendar

5. Matters for Discussion

5.1 Chief Executive's Report

Mr Jones referred to the issues that were covered in the Chief Executive's Report including:

5.1.1 Current and Significant Issues

- Clinician Engagement
- Campbell Hospital Coraki Demolition
- Tweed Valley Hospital Consultation
- Dr Emil Gayed Investigation a lengthy discussion followed on the recommendations contained in the report. Dr David Hutton, Director Clinical Governance is developing an action plan on the recommendations from the Dr Emil Gayed investigation report that will be presented to a future Board meeting.
- Board Sub-Committee Structure.
- Caretaker Period commences on 1 March 2019.

5.1.2 Update on Strategic Issues

Nil for this meeting

5.1.3 Update on Strategic Plan Implementation

Nil for this meeting

5.1.4 Matters for Approval

Nil for this meeting.

Page 6 of 10

5.1.5 Major Key Performance Indicators

- Emergency Treatment Performance (ETP) during January 2019 was 79% against the target of 81%.
- Elective Surgery Access Performance During January 2019, NNSW LHD did not meet the Category 2 and 3 targets. The results were as follows: Category 1, 100% Category 2, 92% against a target of 97% and Category 3 was 95% against a target of 97%.
- NNSW LHD met all Triage targets.
- Transfer of Care result for January 2019 was 90% against a target of 90%.

5.1.6 Risk and Compliance Update

The 4th Quarter 2018 Top 10 LHD Risks Register and Key Risk Indicator Report is attached for information.

5.1.7 Governance Update

On 11 February 2019 NNSW LHD participated in the first 2019 Performance Review Meeting with the Ministry of Health (MOH). The MOH were complimentary of the YTD performance of NNSW LHD, retaining the Level 0 performance rating.

5.1.8 Capital Works/Planning Projects

- Campbell Hospital Coraki
- Tweed Hospital holding works
- Grafton Ambulatory Care Unit
- Evans Head Health One

5.1.9 Matters for Noting

- Big Ideas
- BreastScreen North Coast Services outstanding performance for the period of 108.2% target as outlined in correspondence from Professor David Currow, Chief Cancer Officer, Cancer Institute NSW.

ACTION:

The Board Chair to write a letter of appreciation to Ms Jane Walsh, Director North Coast BreastScreen and team in acknowledging the outstanding results concerning breast-screening performances across NSW.

- Workforce Enhancements
- Chief Executive Study Leave
- Media Training
- Promoting NNSW LHD

5.1.10 Important Meetings/ Diary Commitments

• Mental Health Public Forum 28 February 2019

5.1.11 Questions for the Chief Executive without Notice

Page 7 of 10

- Mr Jones responded to a query regarding RCA's (Root Cause Analysis) advising the LHD has a central system for all RCA's and they are reported through Health Care Quality Committee on a regular basis. NNSW LHD has an internal system for coronials that identifies the recommendations to be followed up.
- The Chair proposed the need to revisit a previous decision of the Board not to endorse future eHealth modules that do not directly integrate with the Cerner EMR. The Chair advised the Board of an Anaesthetic module that would provide superior reporting and clinical risk management in Anaesthetics than the current paper based system. Following general discussion, the Board approved the request that the Chief Executive be authorised to review the proposed pilot of the GETZ Anaesthetic module at Lismore Base Hospital.

Moved:

Dr Allan Tyson

Seconded: Mr Mark Humphries

CARRIED

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

5.2 Committee Minutes (discussed on exception basis otherwise noted)

5.2.1 Health Care Quality Committee (HCQC) – 12 February 2019.

Ms Byrne gave a brief overview of the HCQC meeting.

Ms Byrne advised of a recent RCA involving Ambulance NSW and transport, primarily the result of miscommunication.

It was noted that the HCQC Terms of Reference will be held over to the March 2019 HCQC meeting.

Mr Jones responded to a query around voting rights for Board members at HCQC meetings, stating that Ms Byrne and the Chair as members of the HCQC can vote. However, attendee Board members are not able to vote as attendees.

The Board noted the unconfirmed HCQC minutes.

5.2.2 Finance and Performance Committee (F&PC) – 20 February 2019.

Mr Humphries spoke to the F&PC minutes and tabled a two page report.

General Funds December YTD \$0.150M unfavourable. Several significant factors impacting the expense result still include emergency attendance and occupied bed days.

Own Source Revenue General Funds YTD is currently \$4.77M unfavourable with a forecast at \$8.21M unfavourable should the current trend continue.

General discussion followed around activity across the LHD, with Mr Humphries advising that target NWAU's YTD December is 1.9% favourable.

Page 8 of 10

Mr Jones noted that the current levels of activity are placing significant pressure on the expenditure budget over the next 4 months.

The Board noted the F&PC unconfirmed minutes.

5.2.3 Medical and Dental Appointments Advisory (MDAAC) Committee – 7 February 2019.Dr Tyson gave a verbal update of the MDAAC meeting advising of the potential appointment of two new Obstetricians to Grafton Base Hospital and a further appointment is pending further reference checks.

Dr Tyson spoke briefly of the extensive appointment list of locums across the LHD, especially at GBH.

The Board noted the unconfirmed MDAAC minutes.

5.2.4 Health Services Development Committee (HSDC) – February 2019 meeting cancelled. The Board noted the February 2019 HSDC meeting was cancelled.

5.2.5 Audit and Risk Committee (ARC) – next meeting 6 March 2019.

The Board noted the next ARC meeting will be 6 March 2019.

5.2.6 Clinical Council (CC) - 5 February 2019

The Board noted the unconfirmed CC minutes.

5.2.7 Community Engagement Advisory Council (CEAC) – *next meeting 25 March 2019*. The Board noted the next CEAC meeting will now be held on 25 March 2019.

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) – 5 November 2018.

The Board noted the unconfirmed APM minutes.

Mr Jones advised the Jubullam Health Post redevelopment is on track and Ms Kirsty Glanville, Associate Director Aboriginal Health is now managing the redevelopment.

5.2.10 Mental Health Forum (MHF) - 4 February 2019.

The Board noted the unconfirmed MHF minutes.

Ms Monaghan tabled a document regarding an upcoming course with The Department of Prime Minister and Cabinet and NCPHN around Indigenous Mental Health first aide training for front line operators and carers. Mr Jones is to provide the information to Ms Deidre Robinson, General Manager Mental Health and Drug and Alcohol Services.

The Board approved the Board Chair to provide a copy of the 4 February 2019 Mental Health Forum minutes to the next Mental Health Commission Advisory Council

5.2.11 Research Strategic Advisory Committee (RSAC) –12 February 2019

The Board noted the 12 February 2019 RSAC minutes will be submitted to the 27 March 2019 Board meeting.

5.2.12 Drug and Alcohol Community Advisory Committee (DACAC) -14 February 2019.

Mr Grier gave a verbal report advising about the strategies being engaged in the DACAC meeting on how the committee can be more productive.

The Board noted the unconfirmed DACAC minutes.

5.2.13 NNSW LHD Health Emergency Management Committee (HEMC) – next meeting 18 March 2019.

The Board noted the next HEMC meeting will be held on 18 March 2019.

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

Nil matters for noting

6.1 Major correspondence

Nil major correspondence

6.2 NNSW LHD Seal

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

6.3 Updated Board Calendar

The Board noted the updated Board Calendar.

6.4 Other matters for noting

Nil matters for noting

7. Meeting Finalisation

7.1 Next Meeting

27 March 2019 Ground Floor Meeting Room, Crawford House, Hunter Street, Lismore

- Combined Board Meeting 10.00am -12.00noon
- NNSW LHD Board Meeting 12noon 4.00pm

Ms Hancock gave a brief critique of the meeting.

7.2 Meeting closed

There being no further official business, the Chair declared the meeting closed at 12.55pm.

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

Date 104/19

Dr Brian Pezzutti

Chair

Page 10 of 10

Northern NSW Local Health District Board