

**MINUTES OF THE MEETING OF THE NORTHERN NEW SOUTH WALES LOCAL HEALTH DISTRICT BOARD HELD ON WEDNESDAY 26 JUNE 2019 AT MURWILLUMBAH DISTRICT HOSPITAL, UCRH MEETING ROOM, EWING STREET, MURWILLUMBAH AT 9am.**

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

**In Attendance:**

Mr Wayne Jones, Chief Executive,  
Mr Ged May, Community Engagement Manager  
Ms Jennifer Cleaver (Secretariat)  
Ms Kate Greenwood (Secretariat)  
Ms Janelle Saffin, MP Member for Lismore (part of meeting)  
Ms Katharine Duffy, Director of Nursing and Midwifery and Aboriginal Health (part of meeting)

**Via Teleconference:**

Professor Susan Nancarrow

**Apologies:**

Dr Alasdair Arthur (Annual Leave)  
Dr John Griffin (Annual Leave)

**2.2 Declaration of Pecuniary and/or Conflicts of Interest**

Mr Mark Humphries declared a conflict of interest due to his position on the Westpac Rescue Helicopter Advisory Committee.

**2.3 Previous Minutes:**

- 2.3.1 The Minutes of the Board Meeting held on 29 May 2019 as circulated were ENDORSED as a true and accurate copy with the following amendment:  
5.1.1 to now read ".....Professor Worley, Federal Rural Health *Commissioner*"  
5.2.5(i) to now read ".....are recorded to the *entity* where an individual is attached..."

**Moved:** Dr Allan Tyson

**Seconded:** Dr John Moran

**CARRIED**

**2.3.2 Business Arising from the Minutes:**

**2.3.2.1 Mr Jones to provide a brief on the allocation of mental health funding between community based and in-house services across the Richmond, Clarence and Tweed Valley to 26 June 2019 meeting.**

The information in the brief was discussed with Mr Jones advising the Visiting Medical Officer (VMO) costs for the Lismore Mental Health Unit were relatively low compared to the overall budget due to the difficulty in recruiting Psychiatrists in the Richmond Network.

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A brief discussion ensued around recruiting staff to the Clarence Network with the opening of the new Grafton Correctional facility.

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

Ms Duffy spoke to a PowerPoint presentation around strategic directions outlining the four priority areas for NUM development being our people, our clinical practice, our information technology and our research.

Ms Duffy expanded on several goals including developing a nursing and midwifery culture to support development and leadership, support and sustain a future workforce and identify and support the emotional, mental, physical and spiritual well-being of staff.

Ms Duffy spoke on some of the challenges involved with a being a N/MUM (Nurse/ Midwifery Unit Manager) due to the increasingly complex role with diverse accountabilities. Some of the extensive qualities a N/MUM requires include strong transformational leadership skills, workforce management skills, clinical and corporate governance skills, facilitation, negotiation skills, resilience and self-compassion.

Ms Duffy spoke briefly on a number of tangible methods around developing skills and capabilities including a N/MUM Orientation Framework (online), Essential Coach Approach Program, Professional Development Program and support to attend other external training and development opportunities.

Ms Duffy referred to programs that have been provided to assist N/NUMs including the Heart Works Program, a two-day workshop to develop skills in deep relaxation meditation and mindfulness meditation and feedback so far has been very positive and the LEAP (Leading Edge Assessment Program) that has been designed recently to understand the development, resource and support needs of the LHD N/MUM's. The data collected from these programs will inform the future leadership development programs by developing a baseline data set to help with emerging next generation leaders and leadership programs.

General discussion followed on the importance of developing a positive culture within nursing across the LHD to encourage more people to join and stay in the nursing profession.

Mr Jones and the Board acknowledged Ms Duffy for her dedication to the role and thanked her for the quality of work in developing the strategic plan for N/MUM's.

**2.3.2.3 Mr Jones to provide a brief on the how the NNSW LHD Surgical Plan is being revisited to identify additional strategies to reduce the elective surgery increase for the LHD to be submitted to the 29 May 2019 Board meeting.**

Mr Jones advised that management of surgery forms a key part of the 2019/20 Budget strategies which is covered in the Budget presentation following this Board meeting.

**2.3.2.4 Mr Jones to submit a brief outlining the draft Terms of Reference for the agreed new Board sub-committees for endorsement to the 26 June 2019 Board meeting.**

Following general discussion around the information in the brief, it was agreed Board sub-committees will now be:

- Health Care Quality and Research
- Finance and Performance
- Audit and Risk
- Medical and Dental Appointments Advisory Committee
- Clinical Planning and Engagement Committee
- Community Partnership Advisory Council

The Board requested the Mental Health Council Chair be appointed by the Board, this was agreed.

Further discussion followed on the Terms of Reference for each of the committees. Mr Jones advised the only changes were in Health Care Quality and Research, Clinical Planning and Engagement and Community Partnership Advisory Council were still being developed.

The Board agreed for the following amendment to the draft Terms of Reference:

- Finance and Performance to read "minimum of two Board members"
- Clinical Planning and Engagement committee to now read "all membership is for a minimum of three years".

Following discussion around concerns raised in combining Health Care Quality and Research, the Board agreed that medical research is closely aligned to clinical practice to ensure better healthcare quality outcomes. The Board AGREED that the new Health Care Quality and Research Committee be progressed and reviewed in July 2020.

**ACTION:**

**Mr Jones is to forward a Board sub-committee appointment preference pro-forma to all Board members for their nominations to the Board Sub-Committees and the result is to be submitted to the 31 July 2019 Board meeting.**

**2.3.2.5 Mr Jones to invite Mr Teulan, Nous Group to facilitate a Board Governance workshop to assess the progress of the recommendations in the Board Governance report to be held following a date confirmation from Mr Teulan.**

Mr Jones advised a confirmation date for Mr Teulan to meet with the Board will be provided following Mr Teulan's meeting with the NNSWLHD Executive on 1 and 2 July 2019.

**ACTION:**

**Mr Jones is to schedule a suitable date with Mr Steve Teulan, Nous Group to facilitate a Board Governance workshop to assess the progress of the recommendations in the Board Governance.**

**2.3.2.6 Mr Jones is to provide a progress report on the implementation of the Clinician Engagement Action Plan to the 26 June 2019 Board meeting.**

Mr Jones advised the Clinician Engagement Action Plan has been updated to reflect current engagement that is undertaken by the Executive Leadership Team as part of their portfolios. Mr Jones advised that he will provide a quarterly report that will reflect current engagement actions by each Executive.

Mr Jones noted that engagement is now core business and fundamental for the NNSW LHD with formal and informal rounding now part of the culture. The next phase is for the LHD to emphasise to the clinicians that they are also responsible for engagement.

General discussion followed around the importance of culture and the work underway to create a "whole LHD" culture.

**2.3.2.7 Mr Jones to provide an update report on the percentage of positive and negative media reports across NNSW LHD to the 26 June 2019 Board meeting.**

The Board noted the information in the brief with Mr Jones advising of the significant shift in the percentage of positive media coverage for the LHD over the past two years.

Mr Jones acknowledged the dedicated team effort of Ms Fiona Baker, Media Manager, Mr Casey Fung, Media Assistant and Mr Ged May, Community Engagement Manager to achieve this positive result.

**2.3.3 Other Matters Arising from the Minutes**

**2.3.2.6** In reference to the Nous Board Governance workshop, still to be scheduled, Mr Jones clarified reference to 'blue-sky thinking' was noted in the March 2019 minutes and will be discussed further at the Nous workshop.

**5.1.6** Mr Jones confirmed he will be scheduling a meeting with Mr Dominic Morgan, Chief Executive NSW Ambulance regarding Ambulance Performance Indicators.

**5.2.3** The Chair advised he discussed the concerns around ROB (Recruitment on Boarding) at the recent Board Chairs meeting and was informed work is underway to secure a solution for the recruiting system across all of NSW Health.

**5.2.6** Mr Jones confirmed he will clarify whether University students on placement using LHD vehicles are covered through University insurance and report back through the Chief Executive report.

**3. Matters for Decision**

**3.1 NNSW LHD "Grand Challenges"**

A brief discussion was held around the information in the brief.

The Board **ENDORSED** the NNSW LHD "Grand Challenges".

**3.2 NNSW LHD Asset Strategic Plan 2019/20**

Mr Jones spoke to the information in the brief outlining the top six capital investment priorities. It has been noted the need for a secure unit and a radiation oncology unit at Grafton Base Hospital but no further details are available at present.

Discussion followed on the cost to the LHD on the replanning of the Grafton Base Hospital

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Masterplan and Health Services Development Plan.

The Board **ENDORSED** the NNSW LHD Asset Strategic Plan 2019/20 and approved the top six capital investment priorities.

#### **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
- NNSW LHD Quality Awards
- Murwillumbah Local Rurality status
- Executive Director Medical Services Recruitment – preferred applicant has been identified and relevant referee checks are currently underway.
- NNSW LHD Performance Review – held on 4 June 2019. Feedback for overall performance was described as 'outstanding'. NNSW LHD remains on zero level performance status.

###### **5.1.2 Update on Strategic Issues**

Clinician Engagement Plan Update  
Please refer to Item 2.3.2.6

###### **5.1.3 Update on Strategic Plan Implementation**

Nil for this meeting

###### **5.1.4 Matters for Approval**

Nil for this meeting

###### **5.1.5 Major Key Performance Indicators**

- Emergency Treatment Performance (ETP) during May 2019 was 80% against the target of 81%.
- Elective Surgery Access Performance - During May 2019, NNSW LHD did not meet the Category 2 and 3 targets. The results were as follows: Category 1, 100% Category 2, 94% against a target of 97% and Category 3 was 89% against a target of 97%
- NNSW LHD met all triage targets
- Transfer of Care result for May 2019 was 89% against a target of 90%.

###### **5.1.6 Risk and Compliance Update**

- Clinical Information Systems: Mr Jones spoke to the information in the brief that

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had been submitted to the Audit and Risk Committee over the risks associated with expanding a hybrid Electronic Medical Record (EMR) system across the LHD. Following discussion, it was agreed Mr Jones would explore scanning of anaesthetic records into the EMR as an alternative to piloting of a separate anaesthetic EMR and would liaise with Dr's Melissa Goldberg and David Scott according.

The Chair requested the Clinical Information System brief to be provided to Anaesthetic Department at LBH for clarification and understanding of the Board's decision. The Board agreed.

#### **5.1.7 Governance Update**

Board Sub-Committee Structure  
Please refer to Item 2.3.2.4

#### **5.1.8 Capital Works/Planning Projects**

- Coraki Hospital
- Grafton Correctional Centre – meeting with stakeholders has been deferred to the 10 July 2019.
- Evans Head Health One
- Tweed Valley Hospital
- The Tweed Hospital Helipad – General discussion followed around the permanent closure of The Tweed Hospital helipad due to safety reasons. Concerns were raised around the landing and patient transportation costs involved with landing over the Queensland border.

#### **ACTION:**

**Mr Jones is to organise a meeting with Mr Richard Jones, Chief Executive Officer Westpac Rescue Helicopter to discuss the costings around the new procedures in place due to the permanent closure of The Tweed Hospital helipad and report back to a future Board meeting in due course.**

Mr Mark Humphries declared a conflict of interest due to his position on the Westpac Rescue Helicopter Advisory Committee.

#### **5.1.9 Matters for Noting**

- 2019 People Matters survey
- Resignation of Dr Michael Brydon
- Healthy Food and Drink Framework
- Chief Executive Professional Development

#### **5.1.10 Important Meetings/ Diary Commitments**

- NNSW LHD 2019 Quality Awards – to be held at Ballina RSL on 4 July 2019.

#### **5.1.11 Questions for the Chief Executive without Notice**

- The Chair acknowledged the good news story regarding the recent audit against the Health Food and Drink Framework. The NNSW LHD is one of the top performing LHD's in the state.

**ACTION:**

**Mr Jones to provide a letter of appreciation and thanks for the Board Chair's signature for Ms Jillian Adams, Manager Health Promotion and her team acknowledging the good results achieved in the audit against Health Food and Drink Framework.**

- A suggestion was made for the Board to recognise the dedicated work of the Executive leadership team regarding the NNSW LHD remaining on 0 level performance status at the 12 June 2019 Performance Review.

**ACTION:**

**Mr Jones is to provide individual letters of appreciation for the Board Chair's signature in recognising the Executive leadership team's role in the NNSW LHD remaining on 0 level performance status.**

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

Ms Naree Hancock left the meeting.

## **5.2 Committee Minutes (discussed on exception basis otherwise noted)**

### **5.2.1 Health Care Quality Committee (HCQC) – 11 June 2019.**

Ms Byrne spoke to the minutes advising of a patient story to be provided to the 31 July 2019 Board meeting.

Two short videos were presented to the Board on Leading Better Value Care.

A query was raised regarding how a particular RCA was deemed to be an RCA. Mr Jones clarified this particular situation adhered to the specific guidelines used to determine whether an incident is an RCA.

Discussion ensued around Item 6.4 of the HCQC minutes in terms of the accuracy of the Minute wording in line with the Australian Orthopaedic Association guidelines for hip and knee replacements. Mr Jones will discuss this matter with Dr David Hutton, Director Clinical Governance.

The Board noted the unconfirmed 11 June 2019 HCQC minutes.

### **5.2.2 Finance and Performance Committee (F&PC) – 19 June 2019.**

Mr Humphries gave a brief overview of the F&PC Meeting.

He reported that General funds YTD \$2.84M unfavourable with a forecast of \$3.2M unfavourable. A significant factor impacting the expense budget continues to be increased activity across the LHD. Own Source Revenue General Funds YTD \$0.9M favourable with a forecast \$1.165M favourable.

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Mr Humphries advised that car parking revenue for LBH is progressing well. Following a query on whether this income was covering repayment costs, Mr Jones is to make enquires and report back through the F&PC meeting on this matter.

The Board noted the F&PC unconfirmed minutes.

**5.2.3 Medical and Dental Appointments Advisory (MDAAC) Committee – 13 June 2019.**

Dr Tyson spoke to the MDAAC Meeting providing a brief overview of the meeting.

Mr Jones was requested to give consideration to providing a list of all current medical vacancies to MDAAC.

Mr Peter Carter gave positive feedback on his recent attendance to MDAAC as an observer.

The Board noted the unconfirmed 13 June 2019 MDAAC minutes.

**5.2.4 Health Services Development Committee (HSDC) – 13 June 2019.**

The Board noted the 13 June 2019 HSDC minutes will be submitted to the 31 July 2019 Board meeting.

**5.2.5 Audit and Risk Committee (ARC) – 7 June 2019.**

The Board noted the 7 June ARC minutes will be submitted to the 31 July 2019 Board meeting.

Mr Michael Carter gave a brief overview of the recent ARC meeting with positive feedback received from the Auditor General around internal controls leading into end of year.

Mr Jones advised when the LHD Risk Register is next presented to the Board, Mr David Frazer Chair, Audit and Risk will be invited to attend to participate in the discussion with the Board on the Risk Register.

**5.2.6 Clinical Council (CC) – 11 June 2019.**

The Board noted the 11 June CC minutes will be submitted to the 31 July 2019 Board meeting.

**5.2.7 Community Engagement Advisory Council (CEAC) – 17 June 2019.**

The Board noted the unconfirmed CEAC minutes.

Mr May advised this was the last CEAC meeting with Certificates of Appreciation being presented to members.

A brief update presentation was given on the new Community Partnership Advisory Council.

**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 August 2019**

The Board noted the next APM meeting will be held on 5 August 2019.

**5.2.10 Mental Health Forum (MHF) – 3 June 2019.**

Ms Monaghan gave a brief overview of the success of the Aboriginal Mental Health workshops held in the Clarence recently.

A query was raised around the relocation of the warm room with Mr Jones advising he will follow up and report back to 31 July 2019 Board meeting.

**ACTION:**

**Mr Jones to provide information on the relocation of the warm room at Lismore Base Hospital and report back to the 31 July 2019 Board meeting.**

The Board noted the unconfirmed 2 June 2019 MHF minutes.

**5.2.11 Research Strategic Advisory Committee (RSAC) – 14 May 2019**

Professor Nancarrow commented that it will be important to have a robust process to capture research opportunities as part of the new Health Care Quality and Research Committee.

The Board noted the unconfirmed RSAC minutes.

**5.2.12 Drug and Alcohol Community Advisory Committee (DACAC) –13 June 2019.**

Mr Grier spoke to the DADAC Meeting giving a brief overview of the presentation provided by Corrine Maynard and Dell Swift following their recent attendance to the Patient Experience Symposium.

The Board noted the unconfirmed 13 June 2019 DACAC minutes.

**5.2.13 NNSW LHD Health Emergency Management Committee (HEMC) –17 June 2019.**

The Board noted the 17 June 2019 HEMC minutes will be submitted to the 31 July 2019 Board meeting.

**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 NNSW LHD Seal to be applied.

**6.3 Updated Board Calendar**

The Board noted the updated Board Calendar.

**6.4 Other matters for noting**

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**6.4.1 Update Workplace Culture / People Matter Survey**

The Board noted the Update Workplace Culture / People Matter Survey.

Mr Peter Carter suggested the word 'Facilitator Bullying' in the report could be re-worded.

**6.5 Business without notice**

Dr Tyson indicated Grafton Base Hospital has always been classed as a C1 hospital. Due to the future increased capital works, consideration will need to be given on approaching the Ministry of Health regarding this potential, due to the impact with funding.

**7. Meeting Finalisation**

**7.1 Next Meeting**

12.00pm - 4.00pm

Goonellabah Community Health Centre

37 Oliver Street

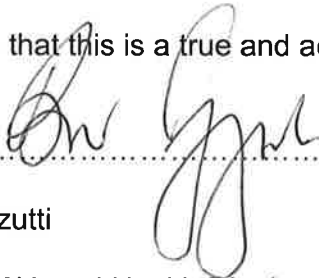
Goonellabah

**7.2 Meeting closed**

There being no further official business, the Chair declared the meeting closed at 1.00pm

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

Signed .....



Date .....

9/8/19

Dr Brian Pezzutti

Chair

Northern NSW Local Health District Board

**10.00 – 10.30am Ms Janelle Saffin, MP of Lismore**

Ms Saffin spoke of her strong commitment to health and the substantial amount of funding she was able to secure for the area particularly in her time as the Federal member.

Ms Saffin advised that she will soon meet with the Hon. Brad Hazzard, Minister for Health and Medical Research to discuss general issues around health.

Discussion followed on the possible remoteness reclassification for Murwillumbah Hospital and the implications on the Murwillumbah Rural Health Training Hub. Ms Saffin indicated that she has met with Mr Kevin Hogan, MP Federal Member for Page, advising that he will meet with Mr Greg Hunt, Federal Minister for Health to discuss this matter further.

The Chair informed Ms Saffin of the increased demand of our services due to rising and ageing population and the pressure and challenges this has caused on the LHD workforce. General discussion followed on the ageing population and the shift across the LHD toward community based care.

Ms Saffin gave a brief overview of her recent meeting with Mr Peter Anderson regarding the Security Review. Positive feedback was received by Mr Anderson on the security system at Bonalbo Multi-Purpose Service.

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The Board Chair advised that the new Concierge service being trialled at the Lismore Base Hospital Emergency Department is working well with several positive reports.

The Chair thanked Ms Saffin for attending the Board meeting.