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, Mr Peter Carter, Dr Alasdair Arthur, Ms Deb Monaghan, Professor Susan Nancarrow, Mr Pat Grier,

In Attendance:

Mr Wayne Jones, Chief Executive,

Mr Ged May, Community Engagement Manager

Ms Jenny Cleaver (Secretariat)

Ms Kate Greenwood (Secretariat)

Ms Lynne Weir (part of meeting)

Ms Kirsty Glanville, Associate Director Aboriginal Health (part of meeting)

Mr Peter Lawless, Director Northern Region Health Infrastructure (part of meeting)

Via Teleconference:

Ms Carolyn Byrne, Ms Naree Hancock, Dr John Moran

Apologies:

Nil

2.2 Declaration of Pecuniary and/or Conflicts of Interest

No new declarations of pecuniary and/or conflicts of interest were reported.

2.3 Previous Minutes:

2.3.1 The Minutes of the Board Meeting held on 27 February 2019 as circulated were ENDORSED as a true and accurate record with the following changes: Page 8 Item 5.2.10 is now to read "......Mental Health first aid training".

Mr Michael Carter requested that the mental health service map be updated to reflect Coraki HealthOne and that Social Futures does not manage Head Space. He was assured the Mental Health Service had been notified of the necessary amendments.

Moved:

Dr Allan Tyson

Seconded: Dr Alasdair Arthur

CARRIED

2.3.2 Business Arising from the Minutes:

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

Page 2 of 10

meeting.

This will be submitted to the 29 May 2019 Board meeting.

ACTION:

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

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 NUM development and education to the 26 June 2019 Board meeting.

This will be submitted to the 26 June 2019 Board meeting.

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.

2.3.2.3 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.

The Board noted an extension was granted for this brief to be submitted to the 29 May 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 29 May 2019 Board meeting.

2.3.2.4 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.

The Board noted the letter of appreciation to Ms Jane Walsh, Director North Coast BreastScreen.

2.3.3 Other Matters Arising from the Minutes

Item 2.3.2.1 Mr Jones advised Dr David Hutton, Director Clinical Governance has written to the Agency for Clinical Innovation (ACI) and the Clinical Excellence Commission (CEC) regarding clarification around Emergency Department (ED) representations and when a response is received, it will submitted through the HCQC.

Item 2.3.2.8 The Chair requested Mr Jones to provide information on the Shared Investment Strategy meeting (North Coast Collective) as part of the Combined Board meeting minutes of the 27 March 2019 and to a future LHD Board meeting. Mr Jones committed to provide an update at a future Board meeting following the upcoming engagement/information sessions being held across MNCLHD and NNSW LHD.

Page 3 of 10

3. Matters for Decision

3.1 Review of NNSW LHD Top 10 Risk Register

Mr Jones gave a brief overview of the changes within the NNSW LHD Top 10 Risk Register and made note of the three risks new risks in the Top 10 being:

- Preventative Asset Maintenance
- Overdue Elective Surgery Patients
- Complications of Clinical Care

Mr Jones advised of the three risks that are no longer in the Top 10 being:

- Housing and Supports for Persons with Disability
- Medication Safety
- Corporate Record System

Responding to a query regarding the risk Overdue Elective Surgery Patients, Mr Jones advised that overdue elective surgery numbers have increased as a result of increased emergency presentations and several equipment failures that have required short term cancellation of elective activity

The Board ENDORSED the NNSW LHD Top 10 Risk Register.

Moved:

Dr Allan Tyson

Seconded: Mr Michael Cater

CARRIED

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
- Corrective Services Incident outside Lismore Base Hospital
- Tweed Holding Works
- Campbell Hospital Coraki Demolition
- Tweed Valley Hospital
- 2019/20 Service Statement
- Media Items of Interest
- Security Reports

5.1.2 Update on Strategic Issues

Nil for this meeting

Page 4 of 10

5.1.3 Update on Strategic Plan Implementation

Consultation on the NNSW LHD Health Services Plan has commenced.

5.1.4 Matters for Approval

Nil for this meeting.

5.1.5 Major Key Performance Indicators

- Emergency Treatment Performance (ETP) during February 2019 was 77% against the target of 81%.
- Elective Surgery Access Performance During February 2019, NNSW LHD did not meet the Category 2 and 3 targets. The results were as follows: Category 1, 100% Category 2, 91% against a target of 97% and Category 3 was 94% against a target of 97%.
- Transfer of Care result for February 2019 was 89% 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 to Board papers in Item 3.1.

5.1.7 Governance Update

NNSW LHD Executive held a planning day on Monday 4 March 2019.

5.1.8 Capital Works/Planning Projects

- Ballina Hospital Theatres
- Grafton Ambulatory Care Unit
- Evans Head Health One

5.1.9 Matters for Noting

- Leading Better Value Care Report
- Ministry of Health has released the NSW Health Good Health Great Jobs Aboriginal Workforce Dashboard.
- Media Training Workshop was held on 20 March 2019.

5.1.10 Important Meetings/ Diary Commitments

 9 April 2019 Second round negotiation meeting for the 2019/2020 Service Statement with the Ministry of Health.

5.1.11 Questions for the Chief Executive without Notice

- General discussion followed on the increased activity in ED across NSW. Ms Weir responded to a query concerning funding of patient transport after hours and advised that Ms Julie Dodds, Manager Non-Emergency Patient Transport is currently looking at this
- Mr Jones responded to a query regarding NSW Ambulance Transfer times. The Chair requested Mr Jones to write to Dr Dominic Morgan, Chief Executive NSW Ambulance

Page 5 of 10

with the view of developing a designated time frame of the on-loading of patients, especially for inter-hospital transfers.

ACTION:

Mr Jones to correspond with Dr Dominic Morgan, Chief Executive NSW Ambulance regarding developing a designated time frame of the on-loading of patients, especially for inter-hospital transfers.

- Ms Weir advised the Review of Community Health Services will be released over coming weeks.
- Ms Weir reported that NNSW LHD had received an excellent result in the Improving Better Cancer Outcomes Report. The Board suggested Ms Fiona Baker, Media Manager prepare a good news story on the results achieved in Improving Better Cancer Outcomes Report.
- Mr Jones noted the increase in Category 2 surgery results advising that 50% of surgery at the moment is emergency.
- Ms Weir informed the Department of Premier and Cabinet are undertaking a review of ETP figures across NSW and representatives will attend the THH to talk with clinicians.
- General discussion followed on the Security Review and the importance of more governance with security across the LHD. Mr Jones is to provide a brief on the implications of the Anderson Security report for NNSW LHD and an update on the progress of the LHD security review.

ACTION:

Mr Jones is to provide a brief on the implications of the Anderson Security report for NNSW LHD and an update on the progress of the LHD security review to the 1 May 2019 Board meeting.

Mr Jones will provide a quarterly report to the Board on NNSW LHD Security Governance.

- A query was raised regarding how aboriginality has been determined in the NSW Health Aboriginal Health Dashboard Toolkit. Mr Jones will follow up on this matter and provide advice through the CE report on 1 May 2019.
- Mr Jones responded to a query around the surgical dashboard, seeking clarification on the difference between a theatre attendance and a surgical separation. Mr Jones will provide advice on this through the CE report on 1 May 2019.

Mr Jones thanked Ms Weir for acting in the role of Chief Executive during his recent leave and noted that her high level of experience assisted in responding to several challenges that were presented during this time.

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

5.2 Committee Minutes (discussed on exception basis otherwise noted)

Page 6 of 10

5.2.1 Health Care Quality Committee (HCQC) - 12 March 2019.

Ms Byrne gave a brief overview of the HCQC meeting referring to a guery that had been raised in the Terms of Reference relating to ambiguity for Board members voting on committee issues.

The Board ENDORSED the HCQC Terms of Reference with the clarification that only appointed Board members to the HCQC are able to vote. Other Board members that join the meeting in an attendance capacity are not eligible to vote.

Moved:

Ms Susan Nancarrow

Seconded: Mr Mark Humphries

CARRIED

Ms Byrne advised there is now sufficient data to undertake a comparison review of Leading Better Value Care.

Overdue elective surgery rates continue to be a concern and Mr Jones advised the LHD will revisit the surgical plan.

ACTION:

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.

Ms Byrne informed that the committee continue to monitor data quality across the NNSW LHD and Dr David Hutton, Director Clinical Governance will be reporting to the November HCQC on where improvements have been undertaken.

The Board noted the unconfirmed HCQC minutes.

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

Mr Humphries spoke to the F&PC minutes giving a brief overview of the meeting advising that General Funds February YTD \$0.5420M unfavourable with a forecast \$1.0M unfavourable. Mr Jones informed the Board that on the current trajectory of activity and expenditure it is anticipated that the LHD will finish the year with an unfavourable budget result greater than the end of February projection. General discussion on activity and expenditure followed.

The LHD benefited from a \$12.2M revenue reduction for Own Source Revenue. This was approximately \$2M above expectations, which will likely see the LHD end the financial year favourable in Own Source Revenue, subject to any further Ministry of Health adjustments.

The Board noted the F&PC unconfirmed minutes.

5.2.3 Medical and Dental Appointments Advisory (MDAAC) Committee – 14 March 2019. Dr Tyson gave a verbal update of the MDAAC meeting.

General discussion followed on the importance of the recruitment process capturing all facets of information before progressing to the next level.

The Board noted the unconfirmed MDAAC minutes.

- 5.2.4 Health Services Development Committee (HSDC) next meeting 11 April 2019. The Board noted the next HSDC meeting will be held 11 April 2019.
- 5.2.5 Audit and Risk Committee (ARC) next meeting 6 March 2019.

 The Board noted the ARC minutes will be submitted to the 1 May 2019 Board meeting.
- 5.2.6 Clinical Council (CC) 19 March 2019 meeting cancelled.

 The Board noted the 19 March 2019 CC meeting was cancelled.
- 5.2.7 Community Engagement Advisory Council (CEAC) 25 March 2019.

 The Board noted the CEAC minutes will be submitted to the 1 May 2019 Board meeting.
- 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 6 May 2019. The Board noted the next APM will be held 6 May 2019.
- 5.2.10 Mental Health Forum (MHF) next meeting 1 April 2019.

 The Board noted the next MHF meeting will be held 1 April 2019.
- 5.2.11 Research Strategic Advisory Committee (RSAC) –12 February 2019
 The Board noted the Research Strategic Advisory Committee minutes.
- 5.2.12 Drug and Alcohol Community Advisory Committee (DACAC) –next meeting 11 April 2019.

The Board noted the next DACAC meeting will be held on 11 April 2019.

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

The Board noted the 18 March 2019 HEMC minutes will be submitted to the 1 May 2019 meeting.

- 6. Matters for Noting/Information (discussed only on exception basis)
 Nil matters for noting
- **6.1 Major correspondence**Nil major correspondence

Page 8 of 10

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

- **6.4.1 Letter from Board Chair regarding Friends of Coraki Campbell Precinct**The Board noted the letter.
- 6.4.2 Response letter to Minister for Health concerning the Board's commitment to culture and staff wellbeing

The Board noted the letter.

6.4.3 Quarterly patient feedback report

The Board noted the report and sought advice on why only complaints counted on IIMS are reported.

ACTION:

Mr Jones to provide a brief on how complaints are captured and reported by other means such as incoming correspondence, emails, phone calls to 1 May 2019 Board meeting.

6.5 Business without notice

 A query was raised seeking clarification of a security policy or procedures when prisoners attend Emergency Departments across the LHD. Discussion followed on the considerations of future health facilities for a separate access to ED for mental health patients and better acoustics for triage desks to allow improved patient confidentiality.

ACTION:

Mr Jones to provide a brief to the 01 May 2019 Board meeting on:

- o the clarification of a security policy or procedures when prisoners attend EDs:
- o separate access to ED for mental health patients and
- o enhanced acoustic for triage desks for improved patient confidentiality.
- It was agreed for time to be allocated on 1 May 2019 Board meeting agenda to revisit the recommendations from the NOUS report on Board Governance.
- Information was sought on what process is in place for advising GP's when their patients have interaction with community health.

ACTION:

Mr Jones to provide a brief on the process in place for advising GP's when their patients have interaction with community health to the 01 May 2019 Board Meeting.

7. Meeting Finalisation

7.1 Next Meeting

9.00am - 1.00pm

1 May 2019 Health Infrastructure Board Room, 2nd floor, Tweed Shire Council

Page 9 of 10

Administration Office, Cnr Brett Street and Wharf Street, Tweed Heads.

Dr Arthur Alasdair Arthur gave a brief critique of the meeting.

7.2 Meeting closed

There being no further official business, the Chair declared the meeting closed at 4.00pm.

Dr Brian Pezzutti

Chair

Northern NSW Local Health District Board

12.00pm Presentation on Aboriginal Cultural Awareness

Kirsty Glanville, Associate Director Aboriginal Health and Deb Monaghan introduced themselves and gave a brief overview of their cultural heritage. Ms Monaghan advised that Aboriginal Cultural Awareness training is mandatory for all LHD staff including Board members.

Ms Monaghan tabled Aboriginal Australia Quiz for Board members to complete.

The presentation gave a brief overview of some key points for the LHD to consider when working with or treating Aboriginal people including:

- a breakdown of indigenous population numbers per state
- life expectancy for male and females
- hospital admission rates
- barriers that affect Aboriginal and Torres Strait Islander people
- Welcome to Country protocol
- concerns of Indigenous women around birthing
- communicating properly and terms to be used and not used

Discussions followed on consent issues within a hospital environment in relation to Aboriginal children often identifying multiple women as mothers. Ms Weir advised that within NSW, consent lies with the primary care giver (person responsible).

Ms Monaghan replied to a query regarding suicide not being listed as a cause of death amongst Aboriginal people advising that it is often very difficult to obtain figures when trying to differentiate between Aboriginal and non-Aboriginal people. However, the disproportionate percentage of suicides is Indigenous and predominately-young males.

The Board thanked Ms Monaghan and Ms Glanville for an interesting and informative presentation.

Page 10 of 10

1.30pm Presentation – Update on Tweed Valley Hospital Development – Mr Peter Lawless, Director Northern Region Health Infrastructure

The Board and Mr Jones welcomed Mr Lawless and thanked him for his dedication and hard work in overseeing the Tweed Valley Hospital development.

Mr Lawless gave a brief overview on how the concept design and master plan have been refined since last presenting to the Board.

The site has potential for long-term expansion in both hospital and other service partnership opportunities, to create a broad health and associated education campus. There is to be a range of different build forms across the campus in both height and style with the key strategy of building into the slope.

A comprehensive floor-by-floor diagram outlining the proposed services located on each level was shown.

Mr Lawless advised preliminary site works have commenced and gave a brief overview of the next phase of the build process.

A brief summary of The Tweed Hospital holding works was presented outlining the work that has been completed and the next phase.

General discussion followed on the importance of the long-term expandability of the operating theatres and emergency department, in the new building. Mr Lawless indicated that the Master Plan has been designed with expansion of theatres to be an option.

Mr Lawless responded to a query regarding architectural design and visual impact of the building advising the Government Architects Office has convened a State Development Review Panel. All major state developments are required to pass the panel for approval. It is important to get the right level of architecture for a particular building, at a particular location while balancing functionality and affordability, but also aesthetically pleasing.