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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.

A presentation was made to Dr John Moran and Dr Doug Warne, former General Practitioners/ Visiting Medical Officers (GP/VMOs) at Murwillumbah District Hospital thanking them for their years of service to the Hospital.

The Board Chair also acknowledged Certificates of Service to be forwarded to the following GP/VMOs who were unable to attend: Dr Chris Millar, Dr Joe Biles, Dr Morrison, Dr Anthony Van Dyken, Dr Snedden, Dr Kettle, Dr Welm and Dr Camilleri.

1. In-camera Session

No In-camera session was required.

2.1 PRESENT AND APOLOGIES:

Dr Brian Pezzutti, Mr David Frazer, Mr Mark Humphries, Dr Joe Ogg, Dr Allan Tyson, Ms Carolyn Byrne, Dr John Moran, Ms Deb Monaghan, Mr Michael Carter, Mr Pat Grier, Dr John Griffin, Professor Susan Nancarrow

In Attendance:

Ms Lynne Weir, Acting Chief Executive

Dr David Hutton, Director Clinical Governance

Dr Richard Buss, Director Workforce

Mr Matt Long, Acting Director Clinical Operations

Ms Lynn Hopkinson, Acting Director Corporate Services

Ms Katharine Duffy, Director Nursing, Midwifery and Aboriginal Health

Ms Deidre Robinson, General Manager Mental Health, Drug and Alcohol Services

Mr Ged May, Community Engagement Manager

Ms Jenny Cleaver (Secretariat)

Ms Kate Greenwood (Secretariat)

Via Teleconference:

Nil for this meeting

Apologies:

Mr Wayne Jones (Chief Executive),

Mr Brett Skinner, Director Finance.

Ms Vicki Rose, Director Integrated Care and Allied Health

2.2 Declaration of Pecuniary and/or Conflicts of Interest

Dr Joe Ogg declared a potential conflict of interest as Sub Dean of Bond and Griffith Universities, Dr John Moran, Sub Dean of Sydney University through University Centre for Rural Health, Associate Professor at University of Wollongong and Assistant Professor at Bond University and Ms Susan Nancarrow, Professor at Southern Cross University

2.3 Previous Minutes:

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2.3.1 The Minutes of the Board Meeting held on 29 August 2018 as circulated were ENDORSED as a true and accurate record of the meeting with the following amendments:

Page 9, paragraph 2 to now read "Pavilion engagement has been extended to 30 June 2019."

Page 1 Conflicts of Interest to now read, "Dr Joe Ogg declared a potential conflict of interest as Sub Dean of Bond and Griffith Universities and Dr John Moran, Sub Dean of Sydney University through UCRH, Associate Professor at University of Wollongong and Assistant Professor at Bond University."

Moved:

Dr Allan Tyson

Seconded:

Mr Mark Humphries

CARRIED

Tweed Valley Hospital Masterplan Presentation

Ms Weir introduced Mr Peter Lawless, Health Infrastructure, Mr Joe McDonald, General Manager Tweed Hospital and Ms Bernadette Loughnane, Executive Director/ Project Co-ordinator, Tweed Valley Hospital.

Mr Lawless gave a slide presentation of Tweed Valley Hospital Masterplan including:

- outlining some of the concept design principals
- · access roads and site boundaries
- · aviation flight paths and ambulance entrance
- public and staff car parking areas
- · education and commercial facilities
- expansion opportunities in the future

General discussion followed around the importance of a well-designed foyer, continued community engagement and the process involved in incorporating Universities from an educational perspective. It was also noted that engagement is required with services including Pathology and X-Ray Services in the development of the Tweed Valley Hospital.

Ms Weir advised the process has commenced to develop a market sounding document to engage universities. Consultation with key stakeholders and clinicians will be undertaken. The Board agreed that if there were any important concerns raised regarding the Tweed Valley Hospital development, Ms Loughnane and Ms Weir are to discuss with Mr Jones, Chief Executive who will escalate to the Board.

The Board thanked Mr Lawless for his informative presentation.

2.3.2 Business Arising from the Minutes:

2.3.2.1 Mr Jones is to submit a brief on a pilot program for Models of Care for the management of aged care beds in NNSW LHD acute facilities to a future Board meeting.

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Please refer to CE report 5.1.9

2.3.2.2 Ms Weir Acting Chief Executive, is to provide further advice on whether all GP's should receive Admission Discharge Notifications for all patients in their care to the 26 September 2018 Board Meeting.

Please refer to CE report 5.1.9

- 2.3.2.3 Ms Weir, Acting Chief Executive to provide a report outlining the number of bed days occupied by patients per age group to the 26 September Board 2018 meeting. Please refer to CE report 5.1.9
- 2.3.2.4 Ms Weir, Acting Chief Executive is to provide a report outlining the falls audit work currently underway to the 26 September 2018 Board meeting.

Dr Hutton spoke to the information contained in the brief.

The Board requested that further narrative be provided around the data to enable the Board to better understand information that is being presented.

The Board requested that Dr Hutton provide data on the falls rate based on the number of bed days by different age groups including narrative on trending data in a brief to the 28 November 2018 Board Meeting.

ACTION:

Ms Weir, Acting Chief Executive is to provide data on the falls rate based on the number of bed days by different age groups including narrative on trending data in a brief to the 28 November 2018 Board Meeting.

2.3.2.5 Ms Weir, Acting Chief Executive is to provide a brief that outlines the steps to be undertaken to expand the discharge summaries work and report back to the 26 September 2018 Board meeting.

The Board noted the Board Chair has granted an extension for this information to be deferred until the 31 October 2018 Board meeting.

ACTION:

Ms Weir, Acting Chief Executive is to provide a brief that outlines the steps to be undertaken to expand the discharge summaries work and report back to the 31 October 2018 Board meeting.

2.3.2.6 The Board requested an update report on the Relationship Management Plan between NSW Health and Insurance to the 28 November 2018 Board meeting.

This will be submitted to the 28 November 2018 Board meeting.

ACTION:

The Board requested an update report on the Relationship Management Plan between NSW Health and Insurance to the 28 November 2018 Board meeting.

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2.3.2.7 Mr Jones to prepare a detailed brief outlining the amount of properties the LHD leases for corporate and clinical services and the financial cost and report back to the 31 October 2018 Board meeting.

This will be submitted to the 31 October 2018 Board meeting.

ACTION:

Mr Jones to prepare a detailed brief outlining the amount of properties the LHD leases for corporate and clinical services and the financial cost and report back to the 31 October 2018 Board meeting.

2.3.2.8 Ms Weir, Acting Chief Executive to provide a brief with comparative information on the number and management of complaints from other LHDs compared to NNSW LHD to the 26 September 2018 Board meeting.

Dr Hutton spoke to the information in the brief and explained that he was unable to obtain the LHD specific data from the MOH.

The Board requested that Ms Weir provide information on the number of presentations to Emergency Departments both in and out of hours, noting there has been some increase in presentations at some LHD Hospitals.

The Board noted the good results achieved by the LHD for complaints received being lower than the NSW Health benchmark and that it was evident the NNSW LHD did not significantly vary on what patients reported on a qualitative measure.

ACTION:

Ms Weir is to provide information on the number of presentations to Emergency Departments both in and out of hours, noting there has been some increase in presentations at some LHD Hospitals.

2.3.2.9 Mr Jones is to provide a brief outlining what processes are in place to ensure RCA long term recommendations are being implemented across the LHD and provide a report back to the 28 November 2018 Board Meeting.

This will be submitted to the 28 November 2018 Board meeting.

ACTION:

Mr Jones is to provide a brief outlining what processes are in place to ensure RCA long term recommendations are being implemented across the LHD and provide a report back to the 28 November 2018 Board Meeting.

2.3.2.10 Ms Weir, Acting Chief Executive is to provide a brief on the areas across the LHD that are difficult to recruit to and why staff leave the organisation using feedback from the exit interviews to the 26 September 2018 Board meeting.

Ms Weir gave an overview of the number of doctors recruited recently across the LHD and noted vacancies still in ENT and Gastroenterology and Faciomaxilliary Specialities. Ms Weir is to provide feedback to the Board on why there is currently no pacemaker service available.

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Following a lengthy discussion on why some services are not currently available, the Board was advised that when a new service is being proposed, a business case needs to be developed and if a new service is being proposed there is a policy to follow.

Ms Weir explained the Healthcare Services Plan sets the strategic direction across the District for the next five years. In November consultation will commence with a consultant to complete the Healthcare Services Plan for 2019-2023 which will then be submitted to the Health Services Development Committee.

The Board requested to be informed, via the Health Services Development Committee, on the services identified in the 2013 – 2018 Healthcare Services Plan that have not been progressed, and whether the Executive considers there are any particular issues that should be addressed in the new Healthcare Services Plan.

Moved:

Dr Allan Tyson

Seconded:

Mr David Frazer

CARRIED

The Board also noted the time taken to recruit some clinicians and the potential to impact on the availability of some services. A query was raised on the notification process undertaken to inform GP's and the public on new medical appointments. The Board was advised medical recruitment is moving to being included in the centralised ROB recruitment system away from eRecruit. The MOH has established a working group with representatives from all LHDs to identify issues around the ROB recruitment system.

Ms Weir indicated that while not all former employees have exit interviews, some departures have been due to family priorities, workload, geographical relocation and retirement. Dr Buss advised that exit interviews are currently not stored centrally however this will be part of the Culture and Wellbeing Plan and it will be included as part of a resignation package. Dr Buss indicated that he will provide an update on the implementation of the Culture and Wellbeing Plan to the February 2019 Board Meeting with Mr Dennis Pfitzner, Culture and Wellbeing Manager presenting to the meeting.

Following a lengthy conversation around patient safety and communication during transfer of care, the Board asked Ms Weir to provide a brief on the process involved around clinician-to-clinician transfer and the chain of command to escalate any concerns during handover.

ACTION:

Ms Weir is to provide feedback to the Board on why there is currently no pacemaker services available.

Ms Weir is to provide a brief on the services identified in the 2013 - 2018

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Healthcare Services Plan that have not been progressed, and whether the Executive considers there are any particular issues that should be addressed in the new Healthcare Services Plan to the 28 November 2018 Board Meeting.

Ms Weir, Acting Chief Executive 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.

2.3.2.11 The Board to correspond with Ms Elizabeth Koff, Secretary NSW Health and the NCPHN regarding what other measures could be undertaken to improve whooping cough immunisation rates.

The Board noted the correspondence that has been forwarded to Ms Elizabeth Koff, Secretary, NSW Health dated 7 September 2018.

2.3.2.12 Ms Weir is to provide a brief outlining the summary of results across the LHD of the People Matter Survey to the 26 September 2018 Board meeting.

Dr Buss gave a brief outline of the negative and positive results of the People Matter Survey that were released on 10 September 2018.

The Board discussed issues around unacceptable conduct including bullying, sexual harassment and physical harm and how effective middle management teams can have an impact on the staff morale.

Ms Weir reassured the Board that misconduct complaints are being actioned with more performance management reviews being undertaken suggesting that this will help to change the culture of the LHD moving forward.

Dr Buss reported each site has been provided their individual results with a one-page summary outlining the highlights and the areas for improvement. All sites have been asked to develop a localised action plan undertaking engagement of the staff to develop these. Local action plans are to be completed by October 2019 for the commencement of an LHD action plan that will be submitted to the Executive and Board.

ACTION:

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

2.3.2.13 Ms Weir, Acting Chief Executive to provide information on the breakdown of various locations and surgical wait times across the LHD in the 26 September 2018 Chief Executive Report.

Please refer to Item 5.1.9 in CE report.

2.3.2.14 Ms Weir, Acting Chief Executive to write to Ms Susan Pearce, Deputy Secretary System Purchasing and Performance to express the Chair's concern on the difficulty in reading the Selected Performance Indicators report.

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The Board noted that Ms Weir made contact with Ms Pearce and the changes that have been made to the format of the Selected Performance Indicators report.

2.3.2.15 Ms Weir, Acting Chief Executive to provide information on the wait times and cost involved for patients needing dentures across the LHD to the 26 September 2018 Board meeting.

The Board noted the brief and discussed the option of self-funding compared to vouchers. The Board Chair suggested that further advice be provided to the Board on the feasibility of an in-house option.

The Board noted that a gap analysis undertaken following the development of the next Healthcare Services Plan will identify gaps in services which will need to be prioritised on a needs basis.

ACTION:

The Acting Chief Executive is to provide a brief that addresses the feasibility of an in-house dental prosthetist to the 31 October 2018 Board meeting.

2.3.2.16 Ms Weir Acting Chief Executive to provide a summary report on the coding improvements in Emergency Departments at GBH, LBH and TTH in the 26 September 2018 Chief Executive report.

Ms Weir advised that following discussion with the Board Chair this item can be removed from the Agenda.

2.3.2.17 Mr Jones to provide a brief on providing equity across the LHD in hospital care and community based services to the 31 October 2018 Board meeting.

The Board Chair requested Mr Brett Skinner, Chief Financial Officer to meet with Dr Ogg to discuss the equity of funding.

ACTION:

Mr Jones is to facilitate a meeting between Dr Ogg and Mr Skinner before the 31 October 2018 Board Meeting.

2.3.2.18 A letter of appreciation is to be forwarded to Mr John Wickham and his team and the Directors of Medical Services thanking them for their efforts in achieving all quinquennium appointments.

The Board noted the letters of appreciation to Mr John Wickham, Dr Katherine Willis-Sullivan and Dr Parmar.

2.3.2.19 A letter to be forwarded to Mr Brett Skinner, Director Finance and his team thanking them for their efforts and the excellent results that the LHD have achieved.

The Board noted the letter of thanks to Mr Skinner.

2.3.2.20 Ms Weir is to correspond with the Mental Health Commission requesting

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information on the evidence base around peer workers and what the expectations are in relation to their level of training.

Please refer to Item 5.1.9 in CE report.

2.3.2.21 Ms Weir, Acting Chief Executive is to provide a brief on whether staff have noticed if there has been less evidence of crisis and whether the de-escalation process has been better due to peer workers.

The Board noted the information contained in the Brief.

The Board suggested that there needs to be data made available to be able to measure the benefits of peer workers in mental health services. Ms Robinson noted that the information in the brief provides qualitative information, work needs to be undertaken on how to collect the quantitative data such as in the reduction of the use seclusion and restraint and readmission rates. It was suggested that such information should be available before the number of peer workers is expanded beyond those positions already planned.

Professor Nancarrow noted that in relation to the Tweed Valley Hospital development there may also be some synergy for developing a pathway of vocational training of peer workers with TAFE who are located close to the Hospital Campus.

The Board agreed for the Chair to provide the brief on peer workers and Item 6.4.1, Brief on Trauma Informed Care to the next Mental Health Commission meeting.

The Board agreed that this item can be removed from the Agenda until further information becomes available.

2.3.3 Other Matters Arising from the Minutes

5.2.6 The Chair referred to his concern on the high use and abuse of prescription drugs within the community and noted the Commonwealth Government has funded each PHN approximately \$1 million to undertake education of GPs on the appropriate use of narcotics.

3. Matters for Decision

3.1 NNSW LHD Corporate Governance Framework and Plan

Mr Long spoke to the information contained in the NNSW LHD Corporate Governance Framework advising that it is based on the MOH Corporate Governance Compendium.

The Board Resolved to ENDORSE the NNSW LHD Corporate Governance Framework and Plan.

Moved:

Mr David Frazer

Seconded:

Ms Carolyn Byrne

CARRIED

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The Chair requested Ms Weir to correspond with the NSW Health Secretary expressing concern about the current Procurement Policy and seeking advice on whether there is an opportunity to make any improvements to the Policy around the contracting of local services, as appropriate in situations such as occurred with the contracting of milk.

ACTION:

Ms Weir is to correspond with Ms Elizabeth Koff, NSW Health Secretary expressing concern about the current Procurement Policy and seeking advice on whether there is an opportunity to make any improvements to the Policy around the contracting of local services, as appropriate in situations such as occurred with the contracting of milk.

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

Ms Weir referred to the issues that were covered in the Chief Executive's Report including:

5.1.1 Current and Significant Issues

- Clinician Engagement
- Power outage at Lismore Base Hospital
- Budget Estimates

5.1.2 Update on Strategic Issues

- People Matter Survey Dramatic increase in the percentage of NNSW LHD workforce participated in the survey this year with an increase to 40% up from 23% last year.
- Bureau Health Information Quarterly Report LHD achieved excellent results. Despite
 increase in activity from April June 2018, 83.9% of LHD patients started their treatment
 quicker which is a 4.5% improvement from the previous year. Some facilities maintained
 their already outstanding results from previous years while others showed improved results
 this quarter. It was noted that this level of performance is only possible because of
 dedicated staff.

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 August 2018 was 79% against the target of 81%.

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- Elective Surgery Access Performance During August 2018, Category 2 & 3 targets were not met. The results were as follows: Category 1, 100% against a target of 100%, Category 2, 94% against a target of 97%. Category 3 was 90% against a target of 97%.
- The Acting Chief Executive highlighted that there were three Category 1 breaches in September.
- NNSW LHD met all Triage targets except Category 2 with 79% against a target of 80%. All Triage categories (except Cat 2) were equal to or greater than the August 2017 results.
- Transfer of Care result for August 2018 was 91% against a target of 90%.

5.1.6 Risk and Compliance Update

Nil for this meeting

5.1.7 Governance Update

Nil for this meeting

5.1.8 Capital Works/Planning Projects

- Bonalbo MPS
- Tweed Valley Hospital (TVH) Awaiting MOH evaluation of the Service Statement.

5.1.9 Matters for Noting

- Community Engagement Manager Mr Ged May officially commenced in this role on 24 September 2018. Mr May comes from Gold Coast Health and has a wealth of experience.
- Article on Ms Katharine Duffy, Director Nursing, Midwifery and Aboriginal Health in Northern Star Newspaper
- Mr Danny O'Connor, Chief Executive Western Sydney LHD announced his retirement.

Business Arising:

- Item 2.3.2.1 Models of Care for the management of aged care beds following advice from the Richmond Director of Medical Services, it was agreed the Hospitalist model of care will continue pro tem. The Board agreed should this change in the future, a brief will be provided.
- Item 2.3.2.2 Local GP's identified which patients receive an Admission Discharge Notification (ADN). The number of patients are limited in consultation with the GP's due to GP fatigue, however GP's have the option to increase the number of patients who have an ADN. The Board noted this information.
- **Item 2.3.2.3** Discussion followed on the information in the CE report on the table depicting bed days by age group for 2016/17 financial year.
- Item 2.3.2.13 The Board noted the report on the Elective Surgery Median Waiting Times (days) from April June 2018. Discussion followed on the increase in surgery of 14% this year with bed days decreasing, the opportunity is now available for more funding to be sought to decrease the wait list.

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Item 2.3.2.20 Peer workers level of training – recommendation 10 of The Mental Health Safety and Quality in NSW Plan – The plan to implement recommendation 10 of the review regarding seclusion, restraint and observation of consumers with a mental illness in NSW Health facilities states that the peer workforce should be developed and professionalised, with the same supports and accountabilities as other disciplines.

The Board noted the information and agreed that this item can be removed from the agenda

5.1.10 Important Meetings/ Diary Commitments

- NNSW LHD Annual General Meeting is scheduled for 12 December 2018.
- The NNSW LHD Consumer Engagement Conference has been scheduled for 22 November 2018.

5.1.11 Questions for the Chief Executive without Notice

Nil questions for this meeting

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) – 11 September 2018

Dr Ogg gave a verbal overview of the HCQC minutes including a brief summary on a recent RCA report where concerns had been raised around the prevention procedures.

Ms Weir advised that Ms Robinson has been requested to provide a comprehensive brief to the HCQC addressing the processes and procedures undertaken during this event that will prevent incidents of this nature in the future.

The Board noted the unconfirmed HCQC Meeting Minutes of 11 September 2018.

The Board Chair and Ms Byrne left the meeting. Mr Frazer than acted as Chair for the remainder of the meeting.

5.2.2 Finance and Performance Committee (F&PC) – 19 September 2018.

Mr Humphries provided a verbal report of the F&PC meeting held 19 September 2018.

Mr Humphries advised the LHD result for August 2018 was \$12,000 unfavourable with the impact from significant activity increase in emergency presentations and planned surgery at LBH and GBH.

The LHD's final Own Source Revenue for 2017/18 was unfavourable.

The Board noted the unconfirmed F&PC Meeting Minutes of 19 September 2018.

5.2.3 Medical and Dental Appointments Advisory (MDAAC) Committee –13 September

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2018.

Dr Tyson provided a verbal report of the MDAAC meeting held on the 13 September 2018.

Dr Tyson advised Dr Katherine Willis-Sullivan, Director Medical Services has recruitment action underway to fill the specialist positions of ENT and Urology.

Mr John Wickham is to report to the October 2018 MDAAC meeting on the frequency of appointments being approved that are subsequently declined by the recommended applicant and ways this can be remedied.

The Board noted the unconfirmed MDAAC minutes dated 13 September 2018.

5.2.4 Health Services Development Committee (HSDC) - next meeting 11 October 2018 The Board noted the next HSDC meeting is scheduled on 11 October 2018.

5.2.5 Audit and Risk Committee (ARC) – 5 September 2018

The Board noted the ARC minutes will be submitted to the 31 October 2018 Board meeting.

5.2.5(a) Audit and Risk Committee (ARC) – 27 August 2018

The Board noted the verbal report given at the 29 August 2018 Board meeting.

5.2.6 Clinical Council (CC) – 4 September 2018 (Dinner)

Ms Weir provided a verbal report of the combined Clinical Council meeting with the North Coast Primary Health Network the focus of the meeting was Aboriginal Health with discussion on areas to improve, challenges and barriers with an Action Plan created to implement the matters discussed.

The Board noted the unconfirmed Clinical Council meeting minutes of 4 September 2018.

5.2.7 Community Engagement Advisory Council (CEAC) – 17 September 2018

The Board noted the CEAC meeting minutes will be submitted to the 31 October 2018 Board Meeting.

Mr Humphries noted the CEAC Terms of Reference are to be reviewed.

Moved:

Mr Mark Humphries

Seconded: Dr Allan Tyson

CARRIED

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 APM minutes of 6 August 2018 will be submitted to the 28 November 2018 Board Meeting.

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5.2.10 Mental Health Forum (MHF) - next meeting 8 October 2018.

The Board noted the next MHF meeting will be held on 8 October 2018.

5.2.11 Research Strategic Advisory Committee (RSAC) – 7 August 2018.

The Board noted the RSAC meeting minutes of the 7 August 2018.

5.2.12 Drug and Alcohol Community Advisory Committee (DACAC) – next meeting 11 October 2018.

The Board noted the next DACAC meeting will be held on 11 October 2018.

5.2.13 NNSW LHD Health Emergency Management Committee (HEMC) - 13 August 2018.

The Board noted the HEMC meeting minutes of the 13 August 2018.

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

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 Combined Board meeting with the NCPHN has been rescheduled for the 31 October 2018 and will now be held at NCPHN office, Tamar Street, Ballina.

The Board agreed to a Leave of Absence for Dr John Griffin from the 16 October 2018 to the 12 December 2018.

6.4 Other matters for noting

6.4.1 Trauma Informed Care Implementation Update Report

The Board noted the information contained in the report.

7. Meeting Finalisation

7.1 Next Meeting

31 October 2018 9.00am – 1.00pm the Ballina Quality Inn, Conference Room, Ballina Quality Inn, Compton Drive, East Ballina

7.2 Meeting closed

There being no further official business, the Chair declared the meeting closed 1.13pm.

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

Signed Date 30/18/18

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Dr Brian Pezzutti Chair Northern NSW Local Health District Board