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#### **PRESENT AND APOLOGIES:**

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

In Attendance:

Victoria LeQuesne, Barbara McFadden, Kerrie Martin, Katharine Duffy, Annette Alexander, Marie Gray, Jennifer McKellar, Murray Spriggs, Jenny Cleaver, Wayne Jones, Kate Greenwood, Lynne Weir, Neil Wornes, Peta Crawford, Kylie Duncan, Smith, Fiona Baker, David Wright, Robyn Watts, Vicki Rose, Matt Long, Richard Buss, Carol Gray, Patricia Hughes, Linda Barney, Susan Freiberg, Shelley Jedrisko, Anthony Beashel

Apologies:

Mr Thomas George MP, Member for Lismore, Mr Geoff Provest MP, Member for Tweed, Mr Chris Gulaptis MP Member for Clarence, Mr Kevin Hogan MP, Federal Member for Page, Dr Allan Tyson, Professor Susan Nancarrow, Dr Vahid Saberi, Chief Executive, North Coast Primary Health Network, Mr Dan Madden, Ms Linda Duncan, Ms Rhonda Shaw, Ms Diane Miller, Ms Ellen Thacker, Mr Shane Prodger, Ms Kathy Johnson and Ms Carrol Brown.

Welcome to Country was provided by Ms Nancy Walke.

Dr Pezzutti, NNSW LHD Board Chair, thanked Ms Nancy Walke for providing the Welcome to Country.

Dr Pezzutti, introduced Mr Wayne Jones, Chief Executive, NNSW LHD and invited him to provide a report on the Year in Review and challenges ahead for NNSW LHD.

Mr Jones also acknowledged the traditional owners of the land before commencing an overview of the Year in Review including some of the challenges ahead for NNSW LHD with the following points being made:

#### Who We Are and Who We Serve

The NNSW LHD covers 20,732 square kilometres and serves seven LGAs as well as the Urbenville part of Tenterfield LGA from the Clarence Valley to the Tweed Heads. The estimated population of NNSW LHD in 2011 was 288,241 and this is projected to grow 8.9% to 313,820 people in 2021.

This population is serviced by:

- 4,077 FTE staff (over 6,000 staff)
- Eight Hospitals
- Four MPSs (with Bonalbo site under construction)
- 18 Community Health Centres
- Two HealthOnes (one further to be built in Evans Head)
- Purpose-built Drug and Alcohol Detoxification Unit

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 Purpose-built Adult and Adolescent Inpatient Mental Health Units at Lismore Base Hospital, The Tweed Hospital and a non-acute Inpatient Mental Health Recovery Unit at Byron Central Hospital

### Financial / Activity Results

- For the Financial Year 2016/17 the budget for the District had increased by \$36 million or 5.1% over the previous year.
- The budget for the 2017/18 Financial Year for the District increased by \$43 million or 5.7% over the previous year.
- At this point NNSW LHD is performing well against our Service Agreement Targets, Own Source Revenue, being \$227k favourable or 0.2%.
- Expenditure Service Agreement \$289k favourable or 0.0%
- Activity Versus Target, NNSW LHD finished the year 4% above target.

A detailed Financial Report was available at the meeting.

#### **Workforce Growth**

 The additional budget in 2016-17 supported the recruitment of the following additional workforce:

Doctors: 20.4 FTENurses: 45.3 FTE

Allied Health: 19.9 FTE

Other: 22.2 FTE

- The additional budget in 2017-18 is supporting the recruitment of additional clinicians and staff with a focus on community based staff being:
  - Dieticians
  - Physiotherapists
  - Exercise Physiologists
  - Diabetes Nurses
  - Mental Health Clinicians.

#### **Major Challenges**

Mr Jones spoke of some of the challenges that faced the NNSWLHD this year, including:

- Summer Activity: Last summer saw a heightened period of presentations through the hospital due to tourism. Lessons were learnt from the gaps in the system last year and strategies are now in place to manage the increased summer activity better this year.
- Floods in March April 2017: the response from staff and clinicians was impressive and many Health Service staff who could not get to their hospital of employment managed to get to a hospital and offer their services. The way the community comes together in a challenge is outstanding.

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There was a co-ordinated response to the mental health, behavioural and psychological impact of the flood. NNSW LHD partnered with the North Coast Primary Health Network and established a telephone number that community members could call, be triaged and progressed accordingly. This service continues today.

 Death of a Mental Health Patient: This situation occurred in May 2014 and was managed and investigated through the Health Care Complaints Commission through the Administrative Review Tribunal through a Coronial investigation and NNSW LHD investigation.

Much has been learnt since the incident and changes have occurred in the Mental Health Unit. Recommendations are to be handed down shortly from the Ministry of Health regarding restraint and seclusion ensuring a situation like this never occurs again.

Winter: The worst on record.

# **Major Highlights**

Mr Jones spoke of some of the highlights for the NNSW LHD this year, some of those being:

State Recognition

NSW Health Awards were held this year which is a competition among LHD's in major categories to be recognised for the work they do. The LHD was acknowledged for many awards, some of those being, Local Solutions Category, Child at Risk Electronic Medical Record Alert, Collaborative Care Category: Early Recognition of Dementia Memory Assessment Program and Staff Member of the Year, Rosa Flaherty

Capital Development

Lismore Base Hospital Stage 3A, 3B and 3C totalling approximately \$360 million. Bryon Central Hospital opened at a cost of \$88 million and going very well. Ballina Redevelopment now completing the Operating Theatre upgrade with a budget of \$6.3 million.

Bonalbo MPS has a budget of \$25 million.

Coraki HealthOne was completed with at a cost of \$4 million. Work is continuing to secure a General Practitioner (GP) with an announcement expected to be made shortly. Mental Health Older Persons Unit budget of \$1.1million has been a worthwhile investment and has assisted to improve amenities available for our mental health patients. This relatively small project is considered to have lifted the mood in the facility due this this investment.

Research Development

A conscious decision was made 12 months ago to invest in research to ensure the LHD is providing contemporary world's best practice and giving the best possible care. With this comes improvement of quality, safety and efficiency. In line with this decision, the LHD has recruited Dr Alex Stephens, to the newly created positon of Director of Research. Dr

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Stephen's position will create a focus to lead, co-ordinate and support research across the NNSW LHD. With this initiative there is a need for governance, which will be provided through the creation of a new Board Research sub-committee. It is expected this committee will focus on and develop links and partnerships with Universities and other research funding bodies across Australia.

# Patient Survey Results

Patient experience feedback is valued by the LHD and improves our care. In the survey conducted during 2016/17, NNSW LHD achieved a score of 97.6% in the good to very good categories compared to a state average of 90.1%.

# Quality and Safety Results

The risk of complications can be involved with any hospital admission and improvement in this area within NNSW LHD over the last number of years has been outstanding. NNSWLHD had lead the state in reducing Healthcare associated blood infections and this result reflects the ongoing commitment by the LHD for a co-ordinated commitment of a team effort to make the patient safety and reduce risk.

Hospital acquired complications in 2016-17 Per 1,000 separations NNSWLHD achieved a result of 24.7 which again is another strong result showing a 30% reduction compared to the state average of 37.

# Questions to Board and Executive on NNSW LHD activities.

Mr Jones thanked everyone and invited questions from the floor to the Board and Executive on NNSW LHD.

Ms Patricia Hughes, a Coraki community member representative thanked the NNSW LHD for the new Coraki HealthOne facility and while acknowledging that the transition was going well suggested there were still some gaps in service provision at Coraki.

Ms Hughes raised concerns about the old hospital site and noted the associated risks. The issue of securing a permanent GP for the Coraki community was also raised. Mrs Hughes handed Mr Jones a petition containing over 400 signatures from the members of the Coraki Community to petition the NSW Ambulance Service to give Community first responder accreditation to the Coraki Fire and Rescue Station 267 to assist the community in medical emergencies.

Mr Jones thanked Ms Hughes' for her feedback and advised that negotiations were still underway in relation to the remediation of the hospital site. Additionally, feedback regarding the appointment of a GP for Coraki is expected in the very near future.

Ms Linda Barney, a Coraki community representative referred to a recent incident at Coraki that required access to a first responder and the use of the defibrillator which were now not available at Coraki. Mr Jones offered to contact the office of Mr Chris Gulaptis MP, Member for Clarence and the relevant authorities to progress the accreditation of a first responder for the Coraki community.

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Dr Pezzutti introduced Dr Richard Mahoney, Director Northern NSW Retrieval Service who provided a presentation on the NNSWLHD Medical Retrieval Service.

Dr Mahoney outlined the three reasons that the Northern NSW Retrieval Service is essential to the LHD community being:

- Able to deliver pre-hospital interventions
- Able to facilitate safe transfer between a peripheral hospital to the Lismore Base Hospital or The Tweed Hospital
- Deliver safe and timely transfer from the Lismore Base Hospital to Southern Queensland hospitals or elsewhere, depending on the patient's needs.

Dr Mahoney shared a recent patient experience of a young teenager falling off a skateboard without a helmet causing diminished consciousness and becoming very agitated. The Northern NSW Retrieval Service was activated and undertook the necessary high level clinical interventions at the roadside being intubation and ventilation. These types of interventions would not have been available to this patient until she had arrived at a hospital emergency department.

The helicopter retrieval service was able to deliver this patient to the Gold Coast Hospital, being the nearest Neurological Centre within two hours. In other circumstances the arrival time cold have been up to six hours. In this instance the patient survived and is in rehabilitation and recovering at home with her family. Dr Mahoney compared the significant time difference of with the Retrieval Team changing the outcome substantially for this patient.

A brief history was given of how the Northern NSW Retrieval Service has evolved from its commence in 1982 out of Ballina Surf Life Saving Club, to its current building at the Lismore Airport.

Since 2014 an LHD doctor is on every mission with the paramedics. From 2016 Westpac Rescue Helicopter Service has taken over as the service provider with the NSW Ambulance providing the helicopter paramedics and the LHD providing the doctor, out of three bases being Lismore, Tamworth and Newcastle.

Today's service is a 24 hour 7 day a week on-call response service attracting around 500 missions a year. There are three types of mission:

- Primary go to accident site, treat and transfer
- Secondary transfer patients between hospitals for specialised treatment
- Search and Rescue tasked by the Search and Rescue Agency to locate missing people, rescue them and return to safety.

The Lismore Helicopter Base was officially opened on the 8 September 2017. This site adjacent to the Lismore Airport was chosen encompassing a structure that can house a helicopter, garage for the road vehicle, a nerve centre room to plan and co-ordinate missions, change room facilities, office spaces and on-call living quarters. Even though the April 2017 floods caused

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havoc, the Lismore Helicopter Base managed to stay above the flood line but it was decided to move operations for that weekend to Hepburn Park.

A dedicated road vehicle, carrying the same equipment as the helicopter can be used if there are weather or engineering constraints. This vehicle can be used in conjunction with the helicopter or used as a response vehicle to an emergency.

Dr Mahoney advised that the Lismore Base Hospital landing pad is an elevated pad on Level 14 Block E, over 240ft above sea-level taking a maximum static load of 6.8 tonne with two dedicated approach and departure path ways to the north and south. This helipad is one of the most advance helipads to be built in the state or even the country. It is envisaged that all future helipads constructed in NSW will be of this design and to this standard. He noted that the Northern NSW LHD has had a relative first.

A video presentation of an episode of Air Rescue was shown in which the Northern NSW Retrieval Service was featured.

Dr Pezzutti thanked Dr Mahoney for his informative address.

# Staff Appreciation and Volunteer Contribution Awards were presented to the following:

#### Certificates of Staff Appreciation were awarded to:

- Shelley Jedrisko: for the collaboration, engagement and leadership you have shown as Clinical Nurse Consultant leading a team of Diabetes Educators.
- Carrol Brown for commitment, professional integrity and clinical care within your role as Child and Family Health Nurse at Grafton Early Childhood Centre
- Carol Gray for commitment to NNSWLHD throughout your traineeship in 2015 and extending to your current role in management of Telehealth bookings
- Neil Wornes for work in providing change management and positive engagement in the implementation of workforce related systems over many years.
- Peta Crawford for strong advocacy and leadership, and commitment to the future of Community Nursing.

#### Board Awards for Community and Volunteer Contribution were presented to:

- Paula Starkey: for many years of volunteering in many aspects including the Coraki
  Campbell United Hospital Auxiliary, a passionate community and carer representative on the
  District Community Engagement Advisory Council and the local Coraki Health One
  Community Advisory Committee.
- Robyn Watt for commitment and generosity of your time to the bereavement support group and to Cancer and Palliative Care inpatients and outpatients, including visiting patients at home.

Dr Pezzutti thanked the Board, Executive, Community Members and Stakeholders for attending the NNSW LHD Annual General Meeting.

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Mr Jones thanked Dr Pezzutti for his commitment to the community and the NNSW LHD, for his stewardship and leadership of the Board for the last 12 months. Mr Jones also commended the Board, Executive and staff for their dedication over the previous year.

As there was no further business the meeting was closed at 4.39pm.

Signed .....

The Hon Dr Brian Pezzutti

Chair, Northern NSW Local Health District

Date