

MINUTES OF THE MEETING OF THE NORTHERN NEW SOUTH WALES LOCAL HEALTH DISTRICT BOARD HELD ON WEDNESDAY 29 MARCH 2017 IN THE GROUND FLOOR MEETING ROOM, CRAWFORD HOUSE, HUNTER STREET, LISMORE COMMENCING AT 12.00NOON

Page 1 of 18

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.

The Chair noted that Ms Susan Pearce, Deputy Secretary, System Purchasing and Performance was unable to attend today's Board Meeting and will now attend the May 2017 Board Meeting.

1. In-camera Session

An in-camera session was not required.

2.1 PRESENT AND APOLOGIES:

Dr Brian Pezzutti (Chair), Mr David Frazer, Dr Joe Ogg, Mr Mark Humphries, Ms Carolyn Byrne, Dr John Griffin, Mr Michael Carter, Mr Patrick Grier and Dr Allan Tyson.

Via Teleconference: Professor Susan Nancarrow

Via Videoconference: Dr John Moran

In Attendance : Mr Wayne Jones, Chief Executive

Ms Bernadette Loughnane, Executive Director, Tweed Byron Health Service Group

Dr David Hutton, Executive Director, Clinical Governance Unit

Dr Richard Buss, Executive Director, Mental Health and Drug and Alcohol

Mr James McGuigan, Executive Director, Finance

Mrs Lynne Weir, Executive Director, Richmond Clarence Health Service Group

Ms Rae Rafferty, Acting Executive Director Nursing and Midwifery

Ms Vicki Rose, Executive Director Allied Health and Chronic and Primary Care

Mr Murray Spriggs (Secretariat)

Mrs Jennifer Cleaver (Secretariat)

Apologies: Ms Deb Monaghan

The Chair welcomed new Board Member, Mr Pat Grier to the meeting.

2.2 Declaration of Pecuniary and/or Conflicts of Interest

There were no Declarations of Pecuniary and/or Conflicts of Interest made.

2.3 Previous Minutes:

2.3.1 The Minutes of the Board Meeting held on 22 February 2017 as circulated were ENDORSED as a true and accurate record of the meeting with the following amendment.

Item 2.3.3.8

“The Board Chair advised that the outsourcing of coding to Pavilion Health is *at this time* an operational matter and is being managed by the Chief Executive. “

Moved: Mr David Frazer
Seconded: Dr Alan Tyson
CARRIED

2.3.3 Business Arising from the Minutes:

2.3.3.1 Ms Jenny Cleaver is to attach a copy of the list of attendees at the 6 December 2016 Annual Public Meeting to the Minutes before placing them on the NSW LHD Internet.

The Board was advised that the list of attendees at the 6 December 2016 Annual Public Meeting has now been attached and placed on the NSW LHD Internet.

This item can be removed from the Action List.

2.3.3.2 Mr Jones is to arrange for a meeting to be scheduled with Lynne Weir, Executive Director Richmond Clarence Group, Vicki Rose, Executive Director Chronic Care and Allied Services, Bernadette Loughnane, Executive Director Tweed Byron Health Service Group and Sharyn White, North Coast Primary Health Network (NCPHN) to meet with Professor Susan Nancarrow to discuss the Allied Health Research Program.

Mr Jones advised that a mutual meeting date is being sought for Professor Nancarrow, Lynne Weir, Executive Director Richmond Clarence Group, Vicki Rose, Executive Director Chronic Care and Allied Services, Bernadette Loughnane, Executive Director Tweed Byron Health Service Group and Sharyn White, NCPHN to meet to discuss the Allied Health Research Program.

Dr Hutton is to provide a copy of the review of the Allied Health Workforce by Richard Christensen for the information of the NSW LHD Board.

The document containing the review of the Allied Health Workforce by Richard Christensen was noted.

The Board noted that the document was quite dated.

This item can be removed from the Action List.

2.3.3.3 Mr Jones is to provide a Brief to the 29 March 2017 Board Meeting on the progress with governance on the Pavilion Health recommendations.

Mr Jones spoke to the Brief and indicated that following a lot of work being undertaken over the last few months, the LHD is starting to see a sustained improvement in coding outcomes. Mr Jones also spoke to the additional support being provided to the coding staff including provision of an education program

The Board noted the information contained in the Brief.

2.3.3.4 Mr Jones is to submit to the 26 April 2017 Board Meeting for consideration a template brief that helps guide reports from the Executive to the Board plus a one

page summary of the Board Sub-Committee's key items and issues at the Sub-Committee meeting.

The Board ENDORSED the Board Paper Template with the amendment to read Recommendations not Recommendation.

The Board ENDORSED the one-page summary of the Board Sub-Committee's key items and issues that were discussed at relevant Board Sub-Committee meetings.

The Board requested that the two templates be trialled for three Board Meetings before an evaluation is undertaken on the value of the documents for the Board.

2.3.3.5 Mr Jones is to arrange for a further staff survey to be conducted on the two preferred NNSWLHD taglines, the original preferred tagline and the tagline proposed by the Board prior to a final decision being made.

Mr Jones reported that a new survey on the two preferred NNSWLHD taglines is underway and it is expected that a recommendation will be able to be submitted to the 26 April 2017 Board Meeting for consideration.

Action:

Mr Jones is to submit a Brief on the result of the survey of the two preferred NNSWLHD Taglines to the 26 April 2017 Board Meeting for consideration.

2.3.3.6 Dr Pezzutti is to write to each NSW LHD Emergency Department congratulating them on their excellent performance figures for January 2017.

The Chair reported that he has signed individual letters to all NSW LHD Emergency Department Managers congratulating them on their excellent performance figures for January 2017.

This item can be removed from the Action List.

2.3.3.7 Mr Jones is to draft a letter of response for the Board Chair's signature to Adjunct Professor Annette Solman, Chief Executive, Health Education and Training Institute (HETI) accepting her offer to present to a future NSW LHD Board Meeting to update the Board on changes to education and training to be offered by HETI.

The Board noted the letter to Adjunct Professor Annette Solman, Chief Executive, HETI dated 17 March 2017.

This item can be removed from the Action List.

2.3.3.8 Dr Pezzutti is to write to Northern NSW Helicopter Rescue Service requesting that consideration be given to representation from Northern NSW and Tamworth on the Northern NSW Helicopter Rescue Service Board. Copies of this correspondence are to be sent to the Minister for Health

The Chair reported on his phone conversation with Mr Cliff Marsh OAM, Chairperson, Northern NSW Helicopter Rescue Service Ltd. The Chair advised that Mr Marsh indicated

that the members of the Northern NSW Helicopter Rescue Service Board have been reduced and with the new entity it now has 9 members down from 12.

The Chair also advised that Mr Marsh proposed that a Community Consultative Committee is established for Tamworth, Lismore and Newcastle and from these Committees, one representative from each Committee will be on the Board of 9, leaving 6 appointments to be on merit.

The Chair indicated that he is comfortable with this proposed arrangement.

The Board noted this feedback from the Chair.

This item can be removed from the Action List.

2.3.3.9 Dr Pezzutti is to write to the Hon Jillian Skinner, former Minister of Health thanking her for her services, support and providing direction during her six years as Minister for Health.

The Board noted the letter to the Hon Jillian Skinner, former Minister for Health dated 15 March 2017.

This item can be removed from the Action List.

2.3.3.10 Mr Wayne Jones is to provide a Brief to the 31 May 2017 NNSW LHD Board Meeting on Surgical Services in the Tweed Byron Health Service Group.

The Chair noted that Mr Jones will provide a Brief to the 31 May 2017 NNSW LHD Board Meeting on Surgical Services in the Tweed Byron Health Service Group.

Action

Mr Wayne Jones is to provide a Brief to the 31 May 2017 NNSW LHD Board Meeting on Surgical Services in the Tweed Byron Health Service Group.

2.3.3.11 Mr James McGuigan is to schedule a meeting with Dr Joe Ogg and Dr Alan Tyson in April 2017 to discuss the differences in funding between The Tweed, Lismore Base and Grafton Hospitals and provide a Brief to 26 April 2017 NNSW LHD Board Meeting on the equity in funding across the LHD.

Mr Jones advised that Mr McGuigan is in the process of scheduling a meeting with Dr Joe Ogg and Dr Alan Tyson in April 2017 to discuss the differences in funding between The Tweed, Lismore Base and Grafton Hospitals.

The Chair suggested that a clinician representative from LBH is also invited to attend the meeting.

Mr Jones advised that he will request Mr McGuigan to contact the Chair of the LBH Medical Staff Council seeking a representative to attend the meeting. Mr Jones is to request Mr McGuigan to provide a brief on the equity in funding across the LHD to the Board following the meeting being held.

Action

Mr James McGuigan is to schedule a meeting with Dr Joe Ogg, Dr Alan Tyson and a representative from the LBH Medical Staff Council in April 2017 to discuss the differences in funding between The Tweed, Lismore Base and Grafton Hospitals.

Mr McGuigan is to provide a Brief to 26 April 2017 NNSW LHD Board Meeting on the equity in funding across the LHD.

2.3.3.12 Mr Jones is to request Mr Craig McNally, Patient Safety and Corporate Risk Manager to provide a report to the 29 March 2017 Board Meeting detailing the follow up that occurs on Coroner's recommendations and actions.

Dr David Hutton reported that there is a system in place for follow-up on Coroner's recommendations that is reported centrally in accordance with Department of Premier and Cabinet Memorandum M2009-12 Responding to Coronial Recommendations which is reflected in the current NSW Health Policy regarding Coroners Cases.

Dr Hutton advised that LHD governance oversight of the implementation of Coroner's recommendations will commence through reports submitted to the Health Care Quality Committee.

The Board noted the information contained in the Brief.

This item can be removed from the Action List.

2.3.3.13 Mr Murray Spriggs is to discuss the possible payments through Honorarium as per Australian Tax Office (ATO) Guidelines for Payments to Volunteers with Mr Jones and provide advice to the 29 March 2017 Board Meeting.

The Board discussed the information contained in the Brief concerning possible payments through Honorarium as per ATO Guidelines for Payments to Volunteers.

The Board noted that the Chief Executive does have discretionary approval for reimbursement payments to be made outside the current arrangements for volunteers.

The Board **MOVED** that the Recommendations outlined in the Brief be noted and that the current arrangements will be maintained.

Moved: Mr David Frazer
Seconded: Mr Mark Humphries
CARRIED

This item can be removed from the Action List.

Other matters arising from the Minutes:

- **Item 2.3.3.8**

The Board requested that it receive a bi-monthly report on what progress is being made with governance of the Pavilion Health recommendations.

Action:

Mr Jones is to provide a bi-monthly report to the Board on what progress is being made with governance of the Pavilion Health recommendations.

- **Item 2.3.3.4**

Professor Nancarrow is to provide a document from Queensland Health on the methodology on reducing some waiting lists by as much as 30%, as indicated in her presentation that was provided to the 22 February 2017 Board Meeting.

Action:

Professor Nancarrow is to provide a document from Queensland Health on the methodology on reducing some waiting lists by as much as 30%, as indicated in her presentation that was provided to the 22 February 2017 Board Meeting.

- **Item 2.3.9**

The Chair noted that the LBH Emergency Department performance will continue to be closely monitored on a monthly basis.

- Mr Jones is to follow-up whether the purchasing of low-low beds at LBH has assisted in the reduction of falls and if so whether this strategy can be put forward for a NNSW LHD Quality Award.

Action:

Mr Jones is to provide advice on whether the purchasing of low-low beds at LBH has assisted in the reduction of falls and whether this strategy can be put forward for a NNSW LHD Quality Award.

3. Matters for Decision

3.1 Grafton Base Hospital (GBH) Master Plan

Dr Tyson stated that the GBH Clinical Services Plan was to be reflected in the GBH Master Planning process, and noted that the Clinical Services Plan did not include recent developments including the need for a secure unit following the opening of the new 1,700 bed Correctional Facility in 2019. Dr Tyson commented that the quality of the Master Plan document is less than what has been submitted previously.

Mr Jones responded that while the document is not optimal it does give an indicative direction to Health Infrastructure for some costings as GBH is rated second on the NNSWLHD Asset Strategic Plan. The issues raised by Dr Tyson will be addressed in subsequent drafts. Mr Jones requested that the Board note the document and the issues that have been raised will be addressed in a subsequent draft.

Ms Byrne queried the heritage listing of GBH and Dr Tyson advised that currently there is no official heritage classification however a new build can include the façade of the old building.

The Board noted the Grafton Base Hospital Master Plan 2016 and requested Mr Jones to undertake work to amend the document to reflect the changes required to accommodate services to the community including the development of the new Correctional Facility prior to submission to the Board for approval.

Action:

Mr Jones is to undertake work to amend the Grafton Base Hospital Master Plan 2017 document to reflect the changes required to accommodate services to the community including the development of the new Correctional Facility and submit the updated document to the Board for approval.

3.2 NSW LHD Strategic Risk Register

Mr Frazer provided a verbal summary on the process that had been undertaken in developing the NSW LHD Strategic Risk Register and commended the updated NNSWLHD Strategic Risk Register to the Board for endorsement.

Dr Hutton noted that Risk No 1 was featured in the recent discussion with the MOH at the NNSWLHD Performance Meeting.

Mr Jones commended the leadership of Dr Hutton in moving to a new process for risk reporting.

The Board Resolved to ENDORSE the NNSWLHD Strategic Risk Register.

Moved Dr Alan Tyson
Seconded Dr Joe Ogg
CARRIED

3.3 Completion of Board representation on Board Sub-Committees

The following Board members were nominated for the Medical and Dental Appointments Advisory Committee (MDAAC), NNSWLHD Drug and Alcohol Advisory Committee and Disaster Planning Committee:

MDAAC - Dr Alan Tyson, Chair and Professor Susan Nancarrow, Board representative
NNSWLHD Drug and Alcohol Advisory Committee - Mr Patrick Grier, Chair and Dr Pezzutti Board representative.

NNSWLHD Disaster Planning Committee - Dr John Moran, Board representative,
Community Engagement Advisory Committee - Mr Patrick Grier, additional Board representative.

Nominated Board Members accepted their nominations to the above Committees.

Mr Jones advised that following the appointment of the NNSW LHD Director of Research consideration will be given to the future direction of the Health Education Workforce Research Forum.

4. Chairman's Update

The Chair advised that he had attended the Centre for Healthcare Knowledge and Innovation Approaches to Risk Stratification in Health on 24 March 2017. Dr Hutton provided a verbal summary of the meeting advising there had been a number of speakers presenting on patient risk stratification models.

The Chair indicated that the forum was about identifying those people at risk and interventions that if actioned would improve the patient's outcomes.

Ms Rose commented that this was the only forum held outside of Sydney and another offer has been made to hold another forum in the LHD with high level speakers.

4.1 Chairman's Calendar

The Board Chair's Calendar was noted.

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 to the Board, which included:

5.1.1 Current and Significant Issues

- Activity and Budget Planning for 2017/18.
- eHealth Programs.
- Clinician Engagement activities.

5.1.2 Update on Strategic Issues

The Executive Strategic Priorities Update Reports have been deferred until the April 2017 Board Meeting following work being undertaken by the Executive and Planning Unit at a Strategic Priorities Workshop.

5.1.3 Update on Strategic Plan Implementation

- The initial Executive Quarterly workshop was held on 17 March 2017.
- The Board Strategic Priorities Report will be provided to the April 2017 Board Meeting for consideration.
- Negotiations are continuing to identify appropriate consultant to support Board Strategic Priorities Workshop.

5.1.4 Matters for Approval

There were no specific matters for approval.

5.1.5 Major Key Performance Indicators

- Elective Surgery and Emergency Patient Results – February 2017 Emergency Treatment Performance (TP) NNSWLHD did not meet the ETP target of 81% with a result of 80%.
- Elective Surgery Access Performance (ESAP) - During February 2017 Categories 1, 2 and 3 were all met.
- NNSW LHD met all Triage performance targets.
- The February 2017 Transfer for Care target of 90% was met with the LHD achieving 91%.

5.1.6 Risk and Compliance Update

- Mr Jones noted the updated NNSWLHD Risk Register was submitted to this meeting of the Board – refer Item 3.2.
- The Work Health and Safety Report March 2017 was noted. The significant improvement in the Workers Compensation Hindsight Adjustment was also noted.

5.1.7 Governance Update

- NNSWLHD Clinical Governance Unit has commenced consultation on the revised Clinical Governance Framework which will be submitted to the Board in due course.
- Following the commencement of the new position of Director of Corporate Services, consultation will commence on the development of the NNSWLHD Corporate Governance Framework

5.1.8 Capital Works/Planning Projects

- The Tweed Hospital (TTH) – NNSWLHD is awaiting formal confirmation on the commitment to fully fund the redevelopment of TTH to the full scope of the Clinical Services Plan.
- TTH holding works have now been signed off to commence with the available funding of \$48 million.
- GBH Ambulatory Care Unit – further discussions have been held with Mr Chris Gulaptis MP, Member for Clarence concerning additional funding to complete the full scope of work required for the Ambulatory Care Unit.
- The HealthOne Centre at Coraki is completed and consultation is continuing with the community around the use of the grounds and the Conference Centre. A community open day is to be held on 8 April 2017. The service will open on 10 April 2017.
- Grafton Correctional Centre – Northern Pathways has been announced as the successful tender to build and operate the 1,700 bed correctional centre in Grafton.

5.1.9 Matters for Noting

- The MOH has agreed to fund the replacement of 366 beds across NNSWLHD which will ensure that all LHD sites have available for use contemporary bed stock that will benefit patient comfort and reduce staff injury risk.
- Some of the older bed stock has been donated to charitable agencies including Rotary who will transport some of the beds to Papua New Guinea.

- Leading Better Value Care – the MOH is leading a statewide program that emphasises a shift from volume to value in healthcare and all LHDs are to implement eight of the selected programs over the 2017/18 financial year in a two phased process.

5.1.10 Questions for the Chief Executive without Notice

- The Board Chair noted the Selected Performance Indicator Report and the poor results by some LHDs.
- In relation to the Surgical Dashboard Report, it was noted that NNSWLHD is undertaking substantially more surgery than many other regional LHDs.
- The result of 78% for <72 hours ; semi urgent and not stable for discharge is to be followed up and Mr Jones is to provide advice to the April 2017 Board meeting on this result.
- Mr Jones is to also provide advice to the April 2017 Board Meeting on the Cancellation of Day Surgery result of 4.1%.
- Following a question on being able to fund additional elective surgery at TTH, Mr Jones advised that a major factor is available capacity at TTH. A surgical plan for Murwillumbah District Hospital (MDH) is being drafted and more work is required on the casemix before the plan is completed. MDH needs to be included as part of the surgery capacity for TTH.
- Mr Jones indicated all surgical sites comply with the NSW Waiting List Policy. NNSWLHD Surgeons submit Request for Admission (RFA) forms in accordance with the Policy. Mr Jones noted there is a need to expand surgical capacity in the Tweed Byron Health Service Group to address a growing demand.
- The Board requested clarification of the information on the Surgery Dashboard Report result on Theatre Utilisation rates between NNSWLHD and North Sydney LHD (NSLHD), as Dr Hutton had indicated at the Performance Meeting that NNSWLHD had achieved more theatre utilisation than NSLHD.
- Mr Jones is to provide a Brief to a future Board Meeting on the finalised report on the review of chemotherapy patients that had been undertaken across NNSWLHD as part of the Statewide review on cancer patients following confirmation of the result by the MOH. Mr Jones noted that of the 96 cases that had been reviewed by NNSWLHD 100% were confirmed as appropriate care and no concerns had been raised and NNSWLHD did not receive any calls from the Healthline number.

5.1.10 Important Meetings/ Diary Commitments

There were no specific meetings/diary commitments for noting.

Actions: Mr Jones is to provide Briefs to the Board on the following matters:

The result of 78% for <72 hours ; semi urgent and not stable for discharge is to be followed up and advice provided to the April 2017 Board meeting.

The NNSWLHD Cancellation of Day Surgery result of 4.1%.

Clarification of the result on Theatre Utilisation rates between NNSWLHD and North Sydney LHD (NSLHD), as Dr Hutton had indicated at the Performance Meeting that NNSWLHD had achieved more theatre utilisation than NSLHD.

A Brief to a future Board Meeting on the finalised report on the review of chemotherapy patients that had been undertaken across NNSWLHD as part of the Statewide review on Cancer patients following confirmation of the result by the MOH.

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

Ms Bernadette Loughnane, Dr David Hutton, Dr Richard Buss, Mr James McGuigan, Ms Rae Rafferty, Ms Vicki Rose and Mrs Lynne Weir left the NNSW LHD Board Meeting.

5.2 Committee Minutes (discussed on exception basis otherwise noted)

5.2.1 Finance and Performance Committee (FPC) – 20 March 2017

Mr Humphries provided a one-page summary of the Finance and Performance Meeting Minutes held on 20 March 2017. The LHD operating budget is currently in a firm position with a full year projection result of \$2.4M favourable. The work undertaken by Pavilion Health has to date achieved 316 NWAUs coded up to October 2016. The activity, staff and capital projects information to end of February 2017 was noted.

The Board noted that to complete the GBH Ambulatory Care Centre to the original and full scope of work an additional \$7 million is required.

The Board indicated that the summary report provided by Mr Humphries was useful and should continue to be provided.

The Board requested that Mr Jones provide a report on the identification rate of patients with private health insurance and the work that is being undertaken to improve these rates for NNSWLHD.

The Board noted the LBH ETP result is showing some improvement with the average wait time for ED admitted patients now at 4.1 hours compared to last year's result of 5.1 hours. The focus needs to go from ED to better engage the broader hospital groups to move patients more quickly.

In relation to the medical waiting list at LBH for Category 1 colonoscopy or gastroscopy, consideration is being given to progressing a staff specialist model for one of the positions and negotiations are underway with the MOH that this will be one of the activity increases noted under local initiatives.

The unconfirmed Minutes of the Finance and Performance held on 20 March 2017 were noted.

Action:

Mr Jones is to provide a Brief on the identification rate of patients with private health insurance and the work that is being undertaken to improve these rates for NNSWLHD to the 26 April 2017 Board Meeting.

5.2.2 Health Care Quality Committee (HCQC)– 14 February and 14 March 2017

Dr Ogg provide a summation of the Health Care Quality Committee meetings held on 14 February and 14 March 2017.

Dr Ogg reported that work continues to be undertaken on the Between The Flags detecting the deteriorating patient to provide more rigour to this process.

There is broad support for more training to be available across the LHD on “Having Difficult Conversations” as it applies to all areas of the organisations. Mr Jones noted that the first of a series of workshops has been held and it was well attended.

Dr Tyson noted that the HCQC Item Issues for Escalation to NNSWLHD Board is a good process for assisting with the Board’s deliberations.

The Board Chair raised the issue in eMR that only one person is to be responsible for the patient documented in the record and is only able to receive the discharge summary. Mr Jones responded that General Practitioners have acknowledged a significant increase in the timeliness of receiving discharge summaries. Additionally, a piece of work on safe clinical handover is being undertaken including improving the content of discharge summaries.

The unconfirmed Minutes of the Health Care Quality Committees held on 14 February and 14 March 2017 were noted.

Action:

The Health Care Quality Committee Minutes are to be listed as the first item with Finance and Performance Committee Minutes second, under Committee Minutes Reporting.

5.2.3 Medical and Dental Appointments Advisory (MDAAC)Committees – 9 March 2017

Dr Tyson provided a summation of the Medical and Dental Appointments Advisory Committees held on 9 March 2017.

Dr Tyson raised the issue of late submission of papers to MDAAC for consideration and advised that the Committee endeavours to process applications as soon as possible however representatives need to attend the meeting to speak to the specific items and applications.

Mr Jones advised that he will circulate a memorandum to Health Service Group Directors and Directors of Medical Services advising that submissions of applications to be considered by MDAAC, are to be provided no later than one week prior to the scheduled

MDAAC meeting and that attendance of all MDAAC Members or their delegate is compulsory.

The Board Chair queried why a temporary appointment is required if a medical officer has been appointed at another LHD Health Service Group facility? Mr Jones advised that he will provide advice to the Board on this query.

The Board Chair reported that he had raised the issue of credentialing pathologists by the MDAAC who are recruited by NSW Health Pathology.

The unconfirmed Minutes of the Medical and Dental Appointment Advisory Committees held on 9 March 2017 were noted.

Action:

Mr Jones is to provide advice to the 26 April 2017 Board Meeting on why a temporary appointment is required if a medical officer has been appointed at another LHD Health Service Group facility.

5.2.4 Health Services Development Committee – 9 February 2017

The Board noted the Board Chair provided a verbal summary of the HSDC Meeting of 9 February 2017 to the 22 February 2017 Board Meeting.

The unconfirmed Minutes of the Health Services Development Committee held on 9 February 2017 were noted.

5.2.5 Audit and Risk Committee (ARC) – 1 March 2017

Mr Frazer reported that the management responses to outstanding audit recommendations have markedly improved since the last reporting period. Mr Frazer noted that Ms Lynne Weir, Executive Director Richmond Clarence Health Service Group had attended the ARC and discussed issues relating to an outstanding audit recommendation and following the explanation provided to the ARC, the Committee was satisfied with the responses that were provided by Ms Weir.

A new audit charter for the ARC is being developed by the MOH and Mr Frazer is supporting the continued involvement of the LHD Board as it is a Board Sub-Committee.

The Board noted the Annual Performance Assessment Summary that was circulated in the Board Meeting papers.

Mr Grier noted that in private sector Work Health and Safety is the number one risk and suggested that it is important that staff understand they are the organisation's highest priority.

Mr Jones responded that he will arrange for Mr Grier to meet with Ms Yvette Bowen, Manager Work Health and Safety and Injury Management to discuss the importance of WHS for the organisation.

The Board noted that the Internal Auditor is supported in undertaking some upskilling and mentoring to assist in further upskilling the Internal Auditor role to meet the new MOH Internal Audit Policy requirements.

The unconfirmed Minutes of the Audit and Risk Committee Meeting held on 1 March 2017 were noted.

Action:

Mr Jones is to arrange for Mr Grier to meet with Ms Yvette Bowen, Manager Work Health and Safety and Injury Management to discuss the importance of WHS for the organisation.

5.2.6 Clinical Council - 14 February 2017

The Board noted that the unconfirmed Minutes of the Clinical Council Meeting held on 14 February 2017 had been reported at the 22 February 2017 Board Meeting.

Mr Spriggs reported that the Clinical Council meeting held on 21 March 2017 had been a combined dinner meeting with the North Coast Primary Health Network. There were thirty-two attendees at the dinner meeting with presentations from Dr Richard Buss, Executive Director Mental Health and Drug and Alcohol and Megan Lawrence, Director of Mental Health Reform and Integration NCPHN and there was discussion on how to better engage clinicians over a ten-year journey.

A further dinner meeting is scheduled towards the end of 2017 with the focus being on Aboriginal Health.

The Board Chair indicated that some of the key stakeholders were not in attendance at the 21 March 2017 meeting, such as FACS, Housing and Police. It is important that these agencies are represented as they play a key role in the care of people with mental illness. The Board Chair suggested that the Integration Plan that had been undertaken in conjunction with NCPHN, has to be revisited to include all stakeholders as part of the plan.

Dr Ogg proposed that the Board Chair correspond with the Premier of NSW requesting that a process is developed for a more formal governance structure that allows the setting up of multi-portfolio issues that impact on health and other portfolios.

Mr Jones spoke on the need to change the mindset that health is the response to all mental health issues in the community. Dr Moran also proposed that LHD staff need to be skilled in having some expertise in mental health first aid.

Moved: Ms Carolyn Byrne

Seconded: Dr Joe Ogg

CARRIED

The unconfirmed Minutes of the Clinical Council Meeting held on 14 February 2017 were noted.

Action:

The Board Chair is to correspond with the Premier of NSW requesting that a process is developed for a more formal governance structure that allows the setting up of multi-portfolio issues that impact on health and other portfolios.

Mr Jones is to provide advice to the Board on NNSWLHD Staff being provided with education that offers skills in mental health first aid.

5.2.7 Community Engagement Advisory Council (CEAC) – 27 March 2017

Mr Spriggs reported that the CEAC Meeting held on 27 March 2017 discussed the Youth Health Forum and a letter will be forwarded to NCPHN and NNSWLHD seeking further engagement in the Forum.

A presentation had been received on Health Literacy and it was agreed that the LHD Community Conference will establish a working party to progress arrangements for a one-day Conference.

The Board noted the Minutes of Community Engagement Advisory Council meeting held on 27 March 2017 will be submitted to the 26 April 2017 Board Meeting for consideration.

5.2.8 Medical Staff Executive Council (MSEC)

Dr Tyson reported that a dinner meeting of the MSEC had been scheduled on 20 April 2017 at Kingscliff, however advice has now been received that a number of invitees and MSEC members are not able to attend. Dr Tyson sought advice on how the Board would like to address this matter.

The Board discussed how to manage the By-Laws requirements to have MSEC as a Board Sub-Committee, as obtaining attendance at this meeting has been problematic for some time.

The Board requested that the 20 April 2017 MSEC meeting be postponed and asked Mr Jones and Mr Spriggs to provide a brief to the Board on a possible way forward for the Board to meet the By-Law requirements.

Action:

Mr Jones and Mr Spriggs to provide a brief to the 26 April 2017 Board Meeting on a possible way forward for the Board to meet the By-Law requirements in relation to the Medical Staff Executive Council.

5.2.9 Aboriginal Partnership Meeting – 6 March 2017

Mr Jones reported that the Aboriginal Partnership Meeting was held on 6 March 2017.

There was a discussion of opportunities for an education program on dementia in Aboriginal people following a presentation by an NGO Provider from Alzheimers Australia.

The Evans Head HealthOne project was noted as going forward and that Aboriginal services will be incorporated into the facility.

There had also been discussion on the Renal Service improvements and kidney health checks, which are to be expanded.

A letter is to be forwarded to Mr Chris Puplick, Chair, Justice Health and Forensic Mental Network Board concerning support for Balunda.

Mr Carter noted that Jullums Aboriginal Medical Service benefits the NCPHN and the LHD and does not receive AMS funding and is a remarkable service that has operated over many years.

The Minutes of the Aboriginal Partnership Meeting held on 6 March 2017 were noted.

5.2.10 Mental Health Forum

The Board noted the next Mental Health Forum is scheduled on 3 April 2017.

5.2.11 Health Education Workforce Research Forum

The next meeting of the Health Education Workforce Research Forum is still to be scheduled.

5.2.12 Drug and Alcohol Community Advisory Committee – 9 February 2017

The Board noted the Minutes of the Drug and Alcohol Community Advisory Committee on 9 February 2017.

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

6.1 Major correspondence

6.1.1 Letter of invitation to Dr Teresa Anderson, Chief Executive, Southern Local Health District to attend a NNSWLHD Board Meeting.

Noted

6.1.2 Letter to Chris Puplick, Chairperson, Justice Health and Forensic Mental Health re Jullums AMS

Noted

6.2 NNSW LHD Seal

There were no items for consideration of the application of the NNSW LHD Seal.

6.3 Updated Board Calendar

Noted.

6.4 Other matters for noting

6.4.1 Brief on Evaluation of NNSWLHD 2016 Community Engagement Conference

Noted

6.4.2 Dr Ogg noted the continued ongoing good engagement with NCPHN by LHD Executive and Staff including Directors of Medical Services.

Mr Carter stated that the engagement by NNSWLHD and the NCPHN is among two in the State that are held as examples of good engagement.

The Board Chair is to correspond with Dr Vahid Saberi, Chief Executive Officer, NCPHN requesting that consideration be given to a member of NNSWLHD Board being a member of the NCPHN Board, as an observer, if there are no current NCPHN Board Member positions currently available.

Action:

The Board Chair is to correspond with Dr Vahid Saberi, Chief Executive Officer, NCPHN requesting that consideration be given to a member of NNSWLHD Board being a member of the NCPHN Board, as an observer, if there are no current NCPHN Board Member positions currently available.

6.4.3 Following a query from Dr Moran, Mr Jones advised that Mr Thomas George MP, Member for Lismore has been approached by the community seeking support for Tenterfield Hospital to become part of NNSWLHD. Mr Jones advised Mr George that this would require a decision at the Legislative level to amend Section 3 of the Health Act. Mr George will be undertaking representation with the appropriate Minister.

6.4.4 Mr Jones reported that in relation to the Medical Officer that is on charges as recently reported in the media, NNSWLHD has undertaken a significant review process and there is no history during his term at the LHD in relation to these charges.

6.4.5 Mr Grier provided a critique of the chairing of the NNSWLHD Board Meeting and suggested that more achievements could be reported to the Board, positive media stories should be arranged and strong engagement with the community should be a priority.

7. Meeting Finalisation

7.1 Next Meeting – 26 April 2017 Rooms 1 and 2 TCERI Education Centre, The Tweed Hospital 12.30pm with lunch

7.2 Meeting close

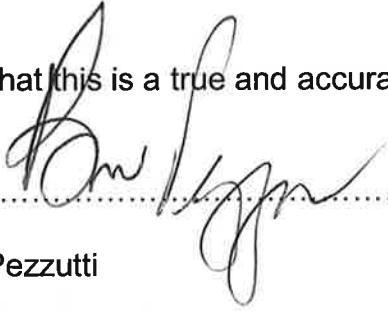
There being no further official business, the Chair declared the meeting closed at 3.40 pm.

MINUTES OF THE MEETING OF THE NORTHERN NEW SOUTH WALES LOCAL HEALTH DISTRICT BOARD HELD ON WEDNESDAY 29 MARCH 2017 IN THE GROUND FLOOR MEETING ROOM, CRAWFORD HOUSE, HUNTER STREET, LISMORE COMMENCING AT 12.00NOON

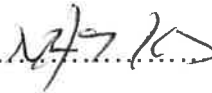
Page 18 of 18

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

Signed



Date



Dr Brian Pezzutti
Chair
Northern NSW Local Health District Board