

**Endorsed**

DATE: Wednesday, 11 August 2021  
 TIME: 11:00am – 3:30pm  
 VENUE: Coffs Harbour Health Campus – In-person or Via Skype

Item / Description	
<b>Attendance and Declarations</b>	
<b>Welcome and Acknowledgement of Country:</b> Professor Heather Cavanagh Chair	
<b>Apologies:</b> Nil	
<b>Observer:</b> Nil	
<b>Declarations of Interest:</b> Nil	
<b>Item 1. Confidential In-Camera Session for Discussion</b>	
	Refer to Agenda
<b>Item 2. Minutes and Action Table</b>	
2.1	<p><b>Minutes of Meeting 14 July 2021</b></p> <p><b>Resolution(s):</b> The MNCLHD Governing Board endorsed the 14 July 2021 Minutes as a true and accurate record.</p>
2.2	<p><b>Action Table August 2021</b></p> <p><b>Resolution(s):</b> The MNCLHD Governing Board accepted progress against action items</p> <p><b>Action(s)</b></p> <p>1. Ensure table is updated with outstanding actions.</p>
2.3	<p><b>Confirmation of Agenda</b></p> <p>Members provided opportunity to change order of the Agenda or request items listed under ‘Noting’</p> <p><b>Resolution(s):</b> The MNCLHD Governing Board noted Item 4.7 Coffs Harbour Health Campus Recommendations Review and Item 4.9 Communications and Strategy Recommendations – Community Engagement May 2021 Report, brought forward for discussion.</p>
<b>Item 3. For Endorsement and/or Discussion</b>	
3.1	<p><b>Governing Board Chair’s Report – Verbal update</b></p> <ul style="list-style-type: none"> <li>• Noted productive meeting with Healthy North Coast Chair.</li> <li>• Met with NSW Secretary of Health who confirmed:             <ul style="list-style-type: none"> <li>○ Hospitals are experiencing additional pressures during pandemic</li> <li>○ Pleased with overall performance of MNCLHD</li> <li>○ Wide ranging discussion covering vacancies in Board membership, value-based healthcare,</li> </ul> </li> </ul>

	<p>digitally enabled LHDs, improving data analytics, racism/cultural safety, workforce development and a more consolidated approach to research.</p> <ul style="list-style-type: none"> <li>○ Agreement that MNCLHD should better show case achievements</li> </ul> <p><b>Resolution(s):</b> The MNCLHD Governing Board accepted the Chair’s verbal report and noted suggestion for future meeting with Chair, Board members and Healthy North Coast/PHN.</p>
3.2	<p><b>Chief Executive’s Report</b></p> <p>Chief Executive report advised the following:</p> <ul style="list-style-type: none"> <li>● Update on MNCLHD ED attendance, VMO appointments, the budget allocation template</li> <li>● MNCLHD continues to work closely with the Aboriginal Medical Services, disability sector and Healthy North Coast to ensure vaccine is available to our most vulnerable communities. <ul style="list-style-type: none"> <li>○ From 5 March to 26 July 2021, over 17,844 first doses administered.</li> </ul> </li> <li>● From 1 July to 26 July 2021, 11,255 community members presented for Covid testing.</li> <li>● Development of Strategic Directions remains priority.</li> <li>● Updates regarding Whole Hospital Patient Flow will be included in September presentation.</li> </ul> <p><b>Resolution(s):</b> The MNCLHD Governing Board accepted the Chief Executive’s Report and attachments.</p> <p><b>Actions(s):</b></p> <ul style="list-style-type: none"> <li>● Chief Executive to provide surgery activity progress.</li> <li>● Further information required on life expectancy of solar panels in Solar Panel Project.</li> <li>● Presentation of Whole of Hospital Patient Flow at September meeting.</li> <li>● Provide six-month update of Kempsey District Hospital birthing registration project.</li> </ul>
3.3	<p><b>MNCLHD Organisational Performance Report</b></p> <p><b>Resolution(s):</b> The MNCLHD Governing Board accepted the Organisational Performance Report. Noted reduction in emergency department and surgery numbers. Noted strategies in place to increase completion rates of staff performance development appraisals.</p> <p><b>Action(s):</b></p> <ol style="list-style-type: none"> <li>1. Provide emergency department and elective surgery update at September meeting.</li> </ol>
3.4	<p><b>Business Paper: Governing Board Safety and Quality Attestation– Clinical Governance and Information Systems (CGIS)</b></p> <p>The Governing Board is required to attests CGIS annually, with responsibilities covering Governance, Leadership and culture.</p> <p><b>Resolution(s):</b> The MNCLHD Governing Board_ Chair, on behalf of the Governing Board and Chief Executive, attest and sign the Attestation Statement.</p> <p>Accepted Business Paper Board Safety and Quality Attestation – CGIS. Accepted CGIS Board Safety and Quality Attestation Evidence. Accepted CGIS Board Safety and Quality Attestation Statement. Accepted CGIS Board Safety and Quality Attestation Fact Sheet. Noted the Board’s accountability and responsibilities.</p>

	<p><b>Action(s):</b></p> <ol style="list-style-type: none"> <li>1. Future statements must show SET approval prior to being endorsed by Board.</li> </ol>
3.5	<p><b>Business Paper: Corporate Governance Attestation Internal Audit, Risk and Compliance (IARC)</b></p> <p>Governing Board is required to Attest Annual Corporate Governance Attestation as part of corporate governance practice and forms part of the LHD's obligations under the Service Agreement.</p> <p><b>Resolution(s):</b> The MNCLHD Governing Board_Chair, on behalf of the Governing Board and Chief Executive, attest and sign the Attestation Statement.</p> <p>Accepted Business Paper Corporate Governance Attestation Internal Audit, Risk and Compliance (IARM). Accepted IARM Corporate Governance Attestation Statement. Accepted IARM Attestation Statement. Noted the Governing Board's accountability and responsibilities.</p> <p><b>Action(s):</b></p> <ol style="list-style-type: none"> <li>1. Determine if previous external intellectual property audits have been conducted and if so report to be provided with terms of reference.</li> <li>2. Risk register review to be conducted to strengthen processes and confirm compliance.</li> </ol>
<b>Item 4. Papers to be taken as read</b>	
4.1	<p><b>Business Paper: MNCLHD Enterprise Risk Report</b></p> <p>Governing Board noted the importance of the Risk report ensuring risks identified and mitigated as appropriate.</p> <p><b>Resolution(s):</b> The MNCLHD Governing Board accepted the MNCLHD Enterprise Risk Report</p> <p><b>Action(s):</b></p> <ol style="list-style-type: none"> <li>1. Enterprise Risk Management Report Staff vaccinations rate include graph trend over time</li> <li>2. Chief Executive all staff email to include Staff Vaccination include graph trend over time.</li> <li>3. Chief Executive monthly report to include staff vaccination progress.</li> </ol>
4.2	<p><b>Business Paper: Virtual Care Achievements and Opportunities</b></p> <p>Governing Board noted onboarding of 15 clinical services to the My Virtual Care Platform and in addition noted the onboarding of 8 residential aged care facilities District wide.</p> <p><b>Resolution(s):</b> The MNCLHD Governing Board accepted Business Paper Virtual Care Achievements and Opportunities.</p> <p><b>Actions(s):</b></p> <ol style="list-style-type: none"> <li>1. Provide report on facilities receiving virtual consultations.</li> </ol>
4.3	<p><b>Business Paper: MNCLHD Telehealth Services Infrastructure</b></p>

	<p>MNCLHD commencing using PEXIP platform for virtual care consultations in April 2020, in response to COVID-19.</p> <p><b>Resolution(s):</b> The MNCLHD Governing Board accepted Business Paper Telehealth Services Infrastructure.</p>
4.4	<p><b>Business Paper: Serious Adverse Event Review (SAER) Report July 2021</b></p> <p><b>Resolution(s):</b> The MNCLHD Governing Board accepted the SAER report and attachment. Noted SAER report link to be sent to Governing Board. Noted there are no new HS1 incidents, no outstanding recommendations.</p> <p><b>Action(s):</b></p> <ol style="list-style-type: none"> <li>1. Review to include received, actioned and completed dates.</li> <li>2. Provide report links to Governing Board.</li> <li>3. Chief Executive report to include update on HS2 events.</li> </ol>
4.5	<p><b>Business Paper: MNCLHD Asset Management and Capital Investment Proposal</b></p> <p><b>Resolution(s):</b> The MNCLHD Governing Board accepted Business Paper Information Asset Management and Capital Investment Proposal.</p>
4.6	<p><b>Business Paper: Strategy and Culture Transformation update July 2021</b></p> <p><b>Resolution(s):</b> The MNCLHD Governing Board accepted Strategy and Culture Transformation update July 2021 Business Paper.</p>
4.7	<p><b>Business Paper: Coffs Harbour Health Campus Recommendations Review</b></p> <p><b>Resolution(s):</b> The MNCLHD Governing Board accepted with action Coffs Harbour Health Campus Recommendations Review.</p> <p><b>Action(s):</b></p> <ol style="list-style-type: none"> <li>1. Provide update with priorities, recommendations, actioned items and incorporate date and timeline.</li> </ol>
4.8	<p><b>Business Paper: Aboriginal Health Report Card (including progress against KPI)</b></p> <p>The Board noted the valuable information provided and thanked Director and the team.</p> <p><b>Resolution(s):</b> The MNCLHD Governing Board Accepted Business Paper and Aboriginal Health Report Card.</p>
4.9	<p><b>Business Paper: Communications and Strategy Recommendations - Community</b> Engagement May 2021 Report 4.9.1 (For reference) Chair's Community Engagement May 2021 Report</p> <p><b>Resolution(s):</b> The MNCLHD Governing Board accepted the Communications and Strategy Recommendations - Community Engagement May 2021 Report</p> <p><b>Action(s):</b></p>

1. Community Engagement Plan to be established of scheduled community partnership meetings.
2. Seek advice from Director Integrated Mental Health, Alcohol and Other Drug Service regarding Aboriginal Mindfulness Pilot Project request for development of resource tool.

#### Item 5. Directorate Dashboard and Summary

- Aboriginal Health and Primary Partnerships
- Clinical Governance and Information Services
- Coffs Clinical Network
- Communications and Corporate Strategy
- Financial Operations and Asset Management
- Hastings Macleay Clinical Network
- Integrated Allied, Community and Cancer Care Service
- Internal Audit, Risk and Compliance
- Integrated Mental Health, Alcohol and Other Drug Services
- North Coast Public Health Unit
- Nursing, Midwifery and Services Reform
- People and Culture
- Research and Knowledge Translation

**Resolution(s):** The MNCLHD Governing Board accepted and noted all Directorate Dashboard and Summary reports as read and note the following action items.

**Action(s):**

1. Clinical Governance and Information Services, report to include graph incorporating trends and commentary on event themes.
2. People and Culture to provide comparison report on general HR matters for previous 2 years.
3. People and Culture to provide comparison report for performance development reviews for previous 2 years.

#### Item 6. Board Sub-Committees

6.1	<p><b>Board Sub-Committee: Community Engagement</b></p> <p>6.1.1 BSC CESC Endorsed Minutes 17 May 2021</p> <p>6.1.2 BSC CESC Pending Endorsement Meeting Minutes 19 July 2021</p> <p><b>Resolution(s):</b> The MNCLHD Governing Board accepted the minutes of the Community Engagement Sub-Committee and attachments.</p>
6.2	<p><b>Board Sub-Committee: People and Culture</b></p> <p>6.2.1 BSC PAC Draft Minutes 16 April 2021</p> <p>6.2.2 BSC PAC Team Report June 2021</p> <p><b>Resolution(s):</b> The MNCLHD Governing Board accepted the minutes of the People and Culture Sub-Committee and attachments.</p>
6.3	<p><b>Board Sub-Committee: Medical and Dental Appointments Advisory</b></p> <p>6.3.1 BSC MDAAC Chair's Summary July 2021</p> <p>6.3.2 BSC MDAAC ENDORSED Minutes 17 June 2021</p> <p>6.3.3 Attachment MDAAC Critical Actions Compliance Declaration July 2021</p>

	<b>Resolution(s):</b> The MNCLHD Governing Board accepted the minutes of the Medical and Dental Appointments Advisory and attachments.	
6.4	Board Sub-Committee: Integrating Allied, Community and Cancer Care Services	No Report
6.5	<p><b>Board Sub-Committee: Health Care Quality</b></p> <p>6.5.1 BSC HCQC Chairs Summary 27 July 2021</p> <p>6.5.2 BSC HCQC Endorsed Minutes 24 May 2021</p> <p>6.5.3 Attachment 1 Summary Report BHI Aboriginal Adult Admitted Patient Survey 2019</p> <p>6.5.4 Attachment 2 Summary of Results BHI ED</p> <p>6.5.5 Attachment 3 Summary of BHI Results Rural Hospital Adult Admitted Patient Survey</p> <p><b>Resolution(s):</b> The MNCLHD Governing Board accepted the minutes of the Health Care Quality Sub-Committee and attachments.</p>	
6.6	<p><b>Board Sub-Committee: Research, Innovation &amp; Health Service Development</b></p> <p>6.6.1 BSC RI&amp;HSD Endorsed Minutes 9 April 2021</p> <p><b>Resolution(s):</b> The MNCLHD Governing Board accepted the minutes of the Research, Innovation &amp; Health Service Development Sub-Committee.</p>	
6.7	<p><b>Board Sub-Committee: Finance and Performance</b></p> <p>6.7.1 BSC F&amp;P Endorsed Minutes 29 June 2021</p> <p>6.7.2 BSC F&amp;P Chair Summary 27 July 2021</p> <p><b>Resolution(s):</b> The MNCLHD Governing Board Accepted the minutes of the Finance and Performance Sub-Committee and attachment Accepted Finance and Performance updated TOR's</p> <p><b>Action(s):</b></p> <ol style="list-style-type: none"> <li>1. Complaint process to be amended changing "Secretariat" to "Executive Sponsor" and include complete process from reporting to conclusion.</li> </ol>	
6.8	Board Sub-Committee: Audit and Risk – Next meeting September	No Report
6.9	Board Sub-Committee: Closing the Gap – Next meeting August	No Report
<b>Item 7. Standing Items*</b>		
7.1	<b>Risk Register*</b>	
7.2	<p><b>Staff Safety and Security</b></p> <p><b>Resolution(s):</b> The MNCLHD Governing Board accepted Staff Safety report.</p> <p><b>Action(s):</b></p> <ol style="list-style-type: none"> <li>1. Provide information to better understand increase in workers' compensation.</li> <li>2. Report to include targets, milestones, and completion dates.</li> </ol>	
<b>Annual Plan Review</b> to be distributed prior to next board meeting for discussion.		

**Item 10. Urgent Business and Correspondence without notice**

<p>Governing Board noted and confirmed the following:</p> <ol style="list-style-type: none"> <li>1. Amendments to Agenda.</li> <li>2. All Board papers are confidential and are not to be distributed further without authorisation.</li> <li>3. Observers to be invited to meetings include allied health, medical, corporate and nursing staff.</li> </ol> <p>Meeting closed 2:42pm</p>	
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**Item 11. Upcoming Events and Proposed Presentations**

15 September	<b>Macksville District Hospital</b> – to be confirmed Presentation - Whole Patient Flow Review, CCNGM, HMCNGM and IMHAOD
13 October	<b>Dorrigo Multi-Purpose Service</b> – to be confirmed Future proposal/recommendations for presentation
10 November	<b>Bellinger River District Hospital</b> – to be confirmed Proposed Presentation Renal Training Facility
8 December	12:30pm - 1:30pm <b>Annual Public Meeting</b> Port Macquarie Glass House 2:30pm - 6:00pm <b>Governing Board Meeting</b> Port Macquarie Community Health Campus
January 2022	Governing Board Strategic Planning day

**MID NORTH COAST LOCAL HEALTH DISTRICT GOVERNING BOARD MEMBERSHIP**

Professor Heather Cavanagh	Chair
Neil Porter	Deputy Chair (Acting)
Dr Jennifer Beange	
Dr Tim Francis	
The Hon. Luke Hartsuyker	
Susan McGinn OAM	
Dr Alison Seccull	

**Secretariat**

Tania Ellis

**Right of Audience and Debate**

Stewart Dowrick	Chief Executive
Delwyn Kruk	Corporate Governance Manager

**DECLARATION OF INTEREST**

Governing Board members are responsible for disclosing circumstances that give rise or may give rise to actual, potential or perceived conflicts of interest.

Declarations are to be submitted to the Board Secretary in writing prior to the meeting. The Board will determine the appropriate course of action, which may include the member leaving the meeting for the duration of the item or abstaining from discussion and/or decision.

**IT IS NOTED THAT ALL GOVERNING BOARD PAPERS AND DISCUSSION ARE CONFIDENTIAL**