

MINUTES

Wednesday, 12 March 2014

Coffs Harbour Health Campus – Education Room 20

& Videoconference: Port Macquarie Community Health Campus – Large VCN

ITEM / DESCRIPTION		ACTION REQUIRED	CARRIAGE	ATT No.
A Attendance and Declarations				
<u>Welcome:</u> Warren Grimshaw, Chair				
Present: Warren Grimshaw Chair (WG), John Barrett (JB), Richard Buss (RB), Stephen Begbie (SB), Neville Parsons (NParsons), Neil Porter (NPorter), Janine Reed (JReed), Jan Ryan (JRyan), Jo Sutherland (JS), Vanessa Edwards (VE)		For Noting	Chair	
Apologies: David Kennedy (DK)		For Noting	Chair	
In Attendance: Stewart Dowrick, Chief Executive (SD), Mary Malouf (MM), Kathleen Ryan (KR), Lynn Lelean (LL), Alan Tankel (AT – from item 4)		For Noting	Chair	
Declaration of Pecuniary Interest, Conflict of Interest and Related Transactions: <u>Continuing:</u> <ul style="list-style-type: none"> Neville Parsons in relation to possible Credit Union Investment/s. Richard Buss in relation to ICT review for both NNSW and MNC LHDs and Aboriginal Mental Health. Neil Porter in relation to employment with Holiday Coast Credit Union (HCCU) Neville Parsons in relation to a family member who has started work in Medical Imaging Janine Reed in relation to Nambucca Valley Aged Care (in relation to aged care matters) 		For Noting	Chair	
B Presentations				
Item 1	Presentations/Guests			
	1.1	Patient Story (Standing Item)		
	VE tabled a thank you letter which has been received from a GP at Macksville in regard to MNCLHD facilitating a flight for a patient so that he could pass away and be buried in his homeland.			
	1.2	Incident Management – Kathleen Ryan, Executive Director Clinical Governance & Information Systems <ul style="list-style-type: none"> Incident Management Update – Feb 2014 RCA reports (for information only) 		
<p>KRyan spoke to the Root Cause Analysis (RCA) reports provided with the Agenda. It was noted that the RCA report is signed off by senior staff at site level and responsibility assigned to a senior member to take the lead to ensure the action is undertaken.</p> <p>There was discussion in relation to these types of incidents and how they may affect accreditation.</p> <p>Noted the Board needs to be assured via the HCQC that follow up action has been initiated in all RCA incidents.</p> <p>Resolution:</p> <ul style="list-style-type: none"> That the Governing Board endorse/note the information provided in Item 1. The Board noted that the processes around closing the loop were the responsibility of the CE. Noted that the governing procedure should be reviewed in case it discourages visitors from visiting 				

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	<p>patients who may feel isolated and then potentially this could lead to mental health issues. Steve to follow up with CEC and infection control and how we deal with patients.</p> <ul style="list-style-type: none"> Jo Sutherland to continue to work with KRyan to improve these processes. <p>CONFIRMED WITHOUT DISSENT</p>			
C Minutes of Governing Board				
Item 2	2.1	Minutes of previous Meeting - Approval of Minutes from meeting of 15 January 2014		
	<p>Noted an amendment to the minutes: Item 4.1 – Should say 4.2% of patients in ED are mental health patients.</p> <p>Resolution: The Board resolved the Minutes of the Governing Board's meeting of 15 January 2014 be confirmed as a true and accurate record.</p> <p>CONFIRMED WITHOUT DISSENT</p>			
D Business Arising				
Item 3	Action Table and follow up			
	3.1	Action Table		
	<ul style="list-style-type: none"> Noted Mortality Report – JS updated. <ul style="list-style-type: none"> JS brought her concern in relation to this report to the attention of the Board – the report is to be presented to HCQC. CE will provide input on the letter to be sent to the Minister. Maternity Services Report is to be presented to the April Board Meeting. 			
E Chief Executive's Report				
Item 4	4.1	Chief Executive's Report for February 2014 (and attachments)		
	<ul style="list-style-type: none"> Noted Port Macquarie redevelopment. Once we receive the keys to the hospital there will be a 6 week handover of the Site. There is a need to ensure we have a building we can use and work from effectively. Need to ensure no financial penalties are incurred with VMO's etc. The processes around extending renal services to Nambucca are progressing. The Chair congratulated administration in bringing this about. CE to pass on to TB and her team on behalf of the Board. Noted John Leary to attend a future Board Meeting to bring the Board up to date in relation to Mental Health issues. Further acknowledged John's report and look forward to him attending a Board Meeting. <p>Resolution:</p> <ul style="list-style-type: none"> The Board resolve to seek urgent advice on health infrastructure and a definitive timeframe. A letter is to be prepared from the Chair to Ministry regarding the issues raised. <p>CONFIRMED WITHOUT DISSENT</p>			
	4.2	Chief Executive's Traffic Light Report		
	4.3	Chief Executive's Performance Indicator Report (Feb 2014)		
	<p>Resolution: That the Governing Board endorse/note the information provided in Item 4.</p> <p>CONFIRMED WITHOUT DISSENT</p>			

F Strategic Matters for discussion and/or endorsement

Item 5

Standing Items

5.1 Budget – no items

CE noted that he has flagged with Ministry that the next 4 year period will be difficult from a budget perspective. CE has requested that the Ministry be flexible during changes in the MNCLHD.

5.2 Governing Board Sub-Committee reports (no items submitted)

Other items

5.3 NSW Health LHD and Specialty Network Board training programs

VE discussed the Board training program:

- Noted the contract with NOUS will expire June 2014.
- There are dates available for May/June 2014. Board members need to register interest by end March.
- Discussion in relation to members attending training in Sydney or having training locally.
- Board noted the preference to undertake training together as a Board.
- KRyan advised that CEC is the most appropriate body for Clinical Governance training.

Resolution:

- **Seek further advice as to what other LHDs are doing in relation to Board training and whether MNCLHD needs to make our own arrangements in relation to this.**
- **Investigate if ACI of CEC can assist. (CE to discuss with Nigel)**
- **That the MNCLHD Governing Board review the proposed training.**

CONFIRMED WITHOUT DISSENT

5.4 MNCLHD Falls Injury Prevention Plan

Draft Falls Injury Prevention Plan and Falls Data Book provided. The Board noted that the Falls Injury Prevention Program has been officially launched.

Resolution: Approved by Chair out of session - submitted for Board Process and formal endorsement.

CONFIRMED WITHOUT DISSENT

5.5 Outcomes from February Strategic Planning Forum

- Draft updates Strategic Plan Progress Report
- 2014 Major Priorities

Noted the need to formulate priorities.

The Board noted their satisfaction with how well the planning session was run and facilitated.

There is a need to develop framework for prioritisation. Noted that ACI should be able to assist with this.

Resolution:

- **That the MNCLHD Governing Board noted the draft updates to the Strategic Plan.**
- **Seek advice from ACI in relation to developing a framework for prioritisation of items identified through the Strategic Planning process.**
- **CE team to develop prioritisation and report to Board on how they were assessed.**
- **Ask Strategic Planning facilitator for an Executive Summary from Strategic Planning Sessions.**

CONFIRMED WITHOUT DISSENT

G Directorate Updates

Item 6

Directorate Updates

6.1 Mental Health & Drug and Alcohol

6.2 Allied Health & Hosted Clinical Services

- Review of Directorate Structure Draft Brief

		<ul style="list-style-type: none"> • Consensus Document • Draft Structure Director Allied Health Aged Care and Integrated Services
	6.3	Public Health
	6.4	Aboriginal Health & Primary Partnerships
	6.5	Nursing, Midwifery & Workforce
	6.6	Clinical Governance & Information Services <ul style="list-style-type: none"> • Brief – Rural eHealth Strategy
	6.7	Financial Operations ABF (Standing item)
	6.8	Executive Support & Strategic Relations VE provided update on Wauchope Urgent Care Centre and documentation including Community Consultations undertaken, overview of media coverage and the Q&A which has been available to the community.
	6.9	Hastings Macleay Clinical Network
		<p>General Discussion</p> <p>JSutherland noted the lack of response by media and community to report from BHI. KRyan is working towards a standard format to make information easily available for community on performance and is awaiting the support of GM's. The Chair will arrange a discussion in relation to Capital Works.</p>
	6.10	Capital Works (no items)
		<p>Resolution: That the Governing Board receive and note the information provided in Item 6.</p> <p>CONFIRMED WITHOUT DISSENT</p>
H Recommendations from Governance Committees		
Item 7	Finance and Performance Committee	
	7.1	Confirmed Minutes of Meeting – 26 November 2013 Confirmed Minutes of Meeting – 17 December 2013 Confirmed Minutes of Meeting – 28 January 2014
	7.2	Chair – Summary of 25 February 2014
	Health Care Quality Committee	
	7.3	Confirmed Minutes of Meeting - 18 November 2013 Confirmed Minutes of Meeting – 16 December 2013
	7.4	Chair – Summary 18 November 2013 Chair – Summary 24 February 2013
	MDAAC	
	7.5	Confirmed Minutes of Meeting - 12 December 2013
	7.6	Recommendations Approval & Critical Action Compliance Declarations – December 2013 Recommendations Approval & Critical Action Compliance Declarations – February 2014
	7.7	Chair – Summary of 13 February 2014
	Workforce, Health & Safety Committee	
	7.8	Confirmed Minutes of Meeting – 16 December 2013 Confirmed Minutes of Meeting – 20 January 2014 Confirmed Minutes of Meeting – 17 February 2014

	7.9	Chair – Summary
		<ul style="list-style-type: none"> The issue was raised in relation to the number of reported assaults in Mental Health. Noted that MNCLHD have received a high number of grievance claims. In particular there is a high number of bullying claims. Workers compensation claims continue to fall. Investigate options to monitor visitor to visitor assaults. Noted the lengthy timeframe to resolve grievance claims. <p>Action:</p> <ul style="list-style-type: none"> The concern in relation to the lengthy timeframe to resolve grievance claims is to be referred to the CE for action and review. Investigation to be carried out into reviewing the details of workers compensation claims.
	Health Services Development & Innovation Committee	
	7.10	Confirmed Minutes of Meeting – 13 December 2013
	7.11	Chair – Summary
	Close the Gap Committee	
	7.13	Confirmed Minutes of Meeting – 19 October 2013
	7.14	Chair – Summary
	Community Engagement Committee	
	7.15	Confirmed Minutes of Meeting – 4 December 2013
	7.16	Community Reference Group
	7.17	Community Connections Report - note - reports from community connections forums are to be forwarded to GM's
	7.18	Chair – Summary
	7.19	Organ and Tissue Donation Governance Committee – Minutes of Meeting 11 November 2013 - Noted the successful launch of Organ Donation Week
	Resolution: That the Governing Board receive and note the reports provided in Item 7 and all recommendations contained therein.	
	CONFIRMED WITHOUT DISSENT	
I Workplace Culture Action Plan		
Item 8	8.1	Your Say Strategies – reporting MNC
	8.2	Workers Compensation Report (due April 2014)
	Resolution: That the Governing Board receive and note the information provided in Item 8.	
	CONFIRMED WITHOUT DISSENT	
J Quality & Safety (no items)		
Item 9	9.1	<p>Accreditation Progress Update</p> <p>Standards have been Identified with Potential <i>Not Met</i> Rating</p> <p>KRyan noted there will be 14 surveyors on site during accreditation.</p> <p>Noted there has been some development/redevelopment of patient information brochures. There has been some dissatisfaction in relation to this as some are difficult to read and artwork had previously been designed to appeal to target market.</p> <p>Action:</p> <ul style="list-style-type: none"> KRyan to present any unexpected expenditure in relation to accreditation to the Finance Committee.

	<ul style="list-style-type: none"> • Another update to be presented to the April Board Meeting, with identified risks. • KRyan to develop and circulate a program of the accreditation period. • KRyan to arrange a social launch/interaction for the accreditation team.
	<p>Resolution: That the Governing Board receive and note the information provided in Item 9.</p> <p>CONFIRMED WITHOUT DISSENT</p>
K For Information of the Board (no items)	
L General Business	
Item 11	Questions on Notice, Correspondence & Other Business
11.1	Confidentiality (Standing Item)
	<p>Resolution: That the Governing Board receive and note the information provided in Item 11.</p> <p>CONFIRMED WITHOUT DISSENT</p>
11.2	<p>Media Release – The Board noted that a report is being released tomorrow which demonstrates unsatisfactory results at PMBH in relation to blood infections during the 2012-13 year. Noted the actions undertaken following these incidents which were financial year 2012/13. Need to review reporting of this type of data to ensure Board is briefed on critical incidents or negative trends in a timely manner.</p>
11.3	<p>Board Assessment and Review</p> <p>The initial report has been prepared by the Chair and was circulated to Board Members at the meeting for information and review.</p> <p>The Chair noted the cohesion of the Board.</p> <p>Noted consideration be given to having the review undertaken externally in 2015.</p> <p>Noted that the Ministry may pay for this every 2-3 years. This will be investigated.</p>
11.4	<p>VE – Update re NSW Health Model By-Laws Review</p> <p>Minimal feedback received in relation to the review of Model By-Laws. MNCLHD will provide response.</p>
M Upcoming visits and events	
Item 12	Board meeting – 9 April (Coffs Harbour Health Campus)
	Board meeting – 14 May (Port Macquarie Base Hospital)
	Board meeting – 11 June (Port Macquarie Community Health Campus – Sam Sangster, Health Infrastructure in attendance)
	MNCLHD Innovation Awards – proposed date 12 June 2014 (Port Macquarie)
	2014 LHD Board Members Conference – Friday 20 June 2014
	Board meeting – 9 July (Dorrigo Multipurpose Service)
	Board meeting – 13 August (Coffs Harbour Health Campus)
	Board meeting – 10 September (Coffs Harbour Health Campus)
	Board meeting – 8 October (Bellinger River District Hospital)
	Board meeting – 12 November (Port Macquarie Base Hospital)
	Board meeting – 10 December (Coffs Harbour Health Campus)
Item 13	Meeting closed at 6.20pm