

ACTION

REQUIRED

CARRIAGE

ATT

GOVERNING BOARD - MINUTES OF MEETING

Wednesday, 10 July 2013

ITEM / DESCRIPTION

Bellinger River District Hospital

& Videoconference: Port Macquarie NCCI

			REQUIRED		14
Attendand	ce and D	Declarations Declarations			
Welcome		Warren Grimshaw, Chair, acknowledged the traditional custodians is held. Also, during NAIDOC week, the Governing Board formally communities across the MNCLHD.			
Present:		Warren Grimshaw (WG), Neil Porter (NPorter), Jan Ryan (JRyan), Janine Reed (JReed), Richard Buss (RB), John Barrett (JB), Neville Parsons (NParsons)	Noted	Chair	
Apologies:		Stephen Begbie, Jo Sutherland, David Kennedy (DK)	Noted	Chair	
In Attend	lance:	Stewart Dowrick (SD), Vanessa Edwards, (VE) Secretariat, Andrew Heslop Chair MSC Bellingen, Stephen Rodwell (SR)	Noted	Chair	
Continuir • .	<u>ng</u> : Janine R Services Neville F	eed in relation to Nambucca Valley Care and specifically Renal at Macksville. Parsons in relation to possible Credit Union Investment/s. Buss in relation to ICT review for both NNSW and MNC LHDs.	Noted for recording on the Register of Pecuniary Interests	Secretariat	
Presentati					
Item 1	Pres	entations			
	1.1	Presentation – Patient Stories			
		Story provided by Kath Boman on experience within the CHH	C Emergency Depart	artment and E	MU.
	<u>Discussion</u> : Main issue raised in relation to the presentation of this story - privacy concerns for patients at CHHC. SR has advised that the staff member should discuss with the Director of Nursing. Board requested that, as this had been brought to their attention, would like it to be raised on their behalf by the CE. <u>RESOLUTION</u> : That the Governing Board bring this issue (through the CE) to the attention of Jo Uttley, Director of Nursing CHHC for discussion/review. CONFIRMED WITHOUT DISSENT				
	1.2	Presentation – Work Health and Safety Update (Stephen Rod Midwifery & Workforce)	dwell, Executive D	irector Nursin	g,
	Disci	ission.			

Minutes: Wednesday, 10 July 2013 Page 1 of 7

claims and institute active management of these.

Premium relates to 07/08/09/10. To reduce strategies have been to eradicating significant long-term

Appointment of WHS Coordinator and Return to Work coordinator has influenced a change in process.



ITEM / DESCRI	PTION		ACTION REQUIRED	CARRIAGE	ATT No.	
	WG have SD- acking focu SD to RESOLU	o review percentages in workforce — ageing workforce. noted the work undertaken by the Workforce Directorate to been implemented and resources applied. MNCLHD setting targets for each site for manual handling an nowledge the premium benefit. Hold workshops twice per yeas on KDH to work on up skilling staff to assist in reducing the provide for the Finance meeting break up by site of the pre TION: That the Governing Board endorse the report and that MED WITHOUT DISSENT	nd stress related cla ear. Further manag incidence of workp mium values.	nims. Need to ement in this a lace injuries.		
C Minutes of						
Item 2	2.1 RESOLU and acc	Approval of Minutes from meeting of 10 July 2013 TION: That the minutes of the Governing Board's meeting of urate record noting report to be provided from CE on Model MED WITHOUT DISSENT			a true	
D Business A	rising					
Item 3	Items for Discussion					
	3.1	New Items for Discussion Issues to be added - Clinical Services Plan and Mental H	ealth Plan			
	3.2	 Community Connections meeting at BRDH JReed and JRyan held the Community Connections mee (10/07/13). Most attendees turned out to be members JReed would like the Governing Board to note that discommaternity services will be required. 	of the Bellingen Ho	ospital Action (_	
	3.3	Andrew Heslop, BRDH Medical Staff Council Chair, was invited he would like to raise. 1. Obstetric Review • An obstetric review was done approximately a be released. • The lack of decision is impacting on GPs who has the ability to recruit. 2. Roof • Hewitt roof – with amount of money being raise for funding to be provided for this to be compled. 3. Service Road and car park • Service road is a major OHS issue. No pedestries which lead from the car park are not safe. SD work on the car park. Will need to negotiate were	year ago and wond old obstetric qualifused by the BHAG is leted. an footpath which agreed to look at the	ering when the ications and al there a comm is safe and the eavailable bu	at will so on itment stairs dget for	
		TION: That the Governing Board receive and note the information will be supported by the control of the control			Juu.	

Minutes: Wednesday, 10 July 2013 Page 2 of 7



Item 4	Items						
	4.1	Chief Executive's Report for July 2013	For Discussion				
		 Discussion: Gateway review for CHHC car park strategy was held the proposal should be for 500 car parks (rather than Infrastructure will conduct negotiations with Council. ICT matter with NNSW resolved. Barry Shepherd provided the ICT issues by Barry Shepherd in regards to resolving the ICT issues 	400 in original submis rided good counsel du	sion). Health ring this negotiatio work undertaken			
		 Services which operate under the Hosted and Held model do at times operate with un administrative restrictions as the need remains to obtain approval/endorsement from LHDs. Not all services can be separated within existing infrastructure. Mental Health Commission – noted that MNCLDH is one of very few LHDs which have 					
		 the Board. SD/WG would encourage representation from the Board. Acknowledged the delay in processing VMO contracts. An apology has been provided t VMOs and short term contracts have been put in place as an interim measure. 					
		 Teaching and research workshop held at South West Workshop provided excellent information to proceed acknowledged the work undertaken by Stephen Begb Heslop advised that GPs were interested in progressir be the appropriate person to approach. SD confirmed MNCLHD will achieve budget for the 2012/2013 finan 	with initial developme ie in instigating this pr ig research projects ar I contact details would	ents. WG rocess. Andrew nd asked who would d be provided.			
		Geoff Vial and will provide letter of acknowledgment					
	4.2	Chief Executive's Performance Indicator Report (July 2013	For Noting				
		 <u>Discussion</u>: Doing well against most measures and report indicates consistent improvement across the full range of measures. 					
		 Under new funding model all hospitals will be compared the solution of the soluti	in coding for patient for specific services is responsible for signir argets nominated und	services. RB noted s difficult to ascertang off on the fundin ler the agreement.			
		RESOLUTION: That the Governing Board note the informato write to MoH as required and, with the CE, continue no CONFIRMED WITHOUT DISSENT					
	4.3	Chief Executive's Systems Performance Report (July 2013	For Noting				
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Minutes: Wednesday, 10 July 2013 Page 3 of 7



Item 5	Directorate Updates						
	5.1	Mental Health & Drug and Alcohol	For Noting				
	5.2	Allied Health & Hosted Clinical Services	For Noting				
	5.3	Public Health	For Noting				
	5.4	Aboriginal Health & Primary Partnerships	For Noting				
	5.5	Nursing, Midwifery & Workforce	For Noting				
		<u>Discussion</u> :					
		 Regrading of positions – JB queried how long have these being outstanding. SR noted that some could be a few months but all staff continued in their positions pending the outcome of the regrading process. Workers' compensation claims – noted that a number of claims each month are usually related to "slips, trips or falls". Bullying & harassment attendance was not well attended in Hastings Macleay. SR has discussed with Rob Pegram and would expect this to be resolved quickly. 					
	5.6	Clinical Governance & Information Services	For Noting				
		Noted that MNCLHD need to continue to focus on unp averages.	lanned admissions to re	educe to state			
	5.7	Financial Operations	For Noting				
	5.8	Planning	For Noting				
		ng continues in	the				
	Capital Works						
	5.9	Building Energy Use in NSW Public Hospitals	For Noting				
		Sustainable Government Investment Program	For Noting				
		Looking to save significant monies under this program. Once loans are repaid MNCLHD benefits from any savings.					
		UTION: That the Governing Board receive and note the in	nformation provided in	Item 5.			
Recomme	endations	from Governance Committees					
Item 6	Finan	ce and Performance Committee					
	6.1	Confirmed Minutes of Meeting - 29 May 2013	For Noting				
	6.2	Chair – Summary of Meeting - 25 June 2013	For Noting				
	Main concern over the last 6 months has been the performance of PMBH. Dr Robert Pegram i to address the Board in September and, having only recently commenced in the role, that time will allow him the opportunity to review and prepare response to these areas.						
	Healt	h Care Quality Committee					
	6.3	Confirmed Minutes of Meeting - 20 May 2013	For Noting				
	6.4	Chair – Summary of 25 June 2013	For Noting				

Minutes: Wednesday, 10 July 2013 Page 4 of 7



	MDAAC						
	6.5	Confirmed Minutes of Meeting - 9 May 2013	For Noting				
	6.6	Recommendations Approval from Meeting of 13 June 2013	For Noting				
	6.7	Critical Action Compliance Declarations from 13 June 2013	For Noting				
	6.8	Chair – Summary of 13 June 2013 Meeting	For Noting				
	JB acknowledged the work done by John Wickham (working across the two LHDs). Board noted appreciation to John Wickham.						
	Workforce, Health & Safety Committee						
	6.9	Confirmed Minutes of Meeting - 20 May 2013	For Noting				
		Issue of note is the recruitment timeframes. SR advised audit of process has been conducted. Timeframes as defined by MoH are not being achieved however, they appear to be unrealistic. Brief has been prepared making some recommendations to adjust some of the timeframes. MNCLHD has a decentralised model for recruitment but not appointment.					
	Health :	Services Development & Innovation Committee (no items)					
	Close the	e Gap Committee (no items -next meeting 22 August 2013)					
	Commu	nity Engagement Committee					
	6.14	Confirmed Minutes of Meeting - 15 May 2013	For Noting				
	6.15	Community Connections Report – 15 May 2013	For Noting				
	6.16	Chair – Summary of 12 June 2013 Meeting	For Noting				
		 Discussion: Meetings are progressing reasonably well, with some progressing well – noting attendance at t BRDH – noted that some issues still need to be resolved with noted that the community appears to be comfortable with the community appears to be comportable with the community appears to be comfortable with the community appears to be comportable with the community appears to be c	the markets. with the communi th progress so far	ty. Andrew He	rks. SD		
		 noted we may need to provide more information to the capital works. JReed would like follow up to some issues which were rai be resolved. JRyan need to make contact with the Pink Lappreciated. SD confirmed he will follow up with the Ker Andrew Heslop undertook to write a letter to the paper i WG agreed. 	adies and let then mpsey volunteers.	n know they ar	pear to e		
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Minutes: Wednesday, 10 July 2013 Page 5 of 7



	9.3	Organ and Tissue Donation Collaborative Governance Committee
		<u>Discussion</u> :
		 Call for nomination of a Chair. WG agreed to Chair this Committee, with Deputy to be nominated.
		<u>RESOLUTION</u> : That the Governing Board endorse the appointment of Warren Grimshaw as Chair for the MNCLHD Organ and Tissue Donation Collaborative Governance Committee.
		CONFIRMED WITHOUT DISSENT
		TION: That the Governing Board receive and note the information provided in Item 9. MED WITHOUT DISSENT
K General Bu	usiness	
Item 11	Questio	ons on Notice & Correspondence
	11.1	Community Connections meeting at BRDH
		 JReed and JRyan held the Community Connections meeting at BRDH prior to the Board meeting (10/07/13). Majority of attendees were representing the Bellingen Hospital Action Group. JReed would like the Governing Board to note that discussion to resolve the concerns regarding maternity services should be progressed to address community expectations.
	11.2	Kempsey Shire Council Letter
	11.3	Remuneration
		 Noted advice that remuneration process for Board members has now been satisfactorily resolved with HealthShare. Quarterly payments will be processed by Mary Malouf. Members will need to register with Stafflink to access payslips and payment summaries.
	11.4	Publication of Minutes
		 As part of the NSW Government's commitment to 'restore accountability to government', Goal 31 is "Improve government transparency by increasing access to government information". In order to bring MNCLHD in line with the majority of NSW LHDs, it is proposed that the confirmed Minutes of the MNCLHD Governing Board will be made publicly available on the website. Items noted as confidential are to be discussed 'in camera' and will not be included as part of the published Minutes. WG to work with VE on this to progress.
		RESOLUTION: That the Governing Board endorse the proposal to facilitate public access to confirmed minutes of the MNCLHD Governing Board.
		CONFIRMED WITHOUT DISSENT
	11.5	Visit by Chair ACI (Chair)
		Agreed in principle for the Chair to commence negotiations to arrange a visit to MNCLHD.
	11.6	Feedback
		A performance review will be part of the Board process. WG has raised a number of the items raised by members with the CE and VE and process to resolve these is in train. Will also provide a state of the CE and VE and process to resolve these is in train.
		Will also need to add a review of the Strategic Plan to the Agenda for a future meeting.
	RESOLU'	TION: That the Governing Board receive and note the information provided in Item 11.
	CONFIRI	MED WITHOUT DISSENT

Minutes: Wednesday, 10 July 2013 Page 6 of 7



L Upcoming visits and events			
Item 12	2013		
	Board meeting – 14 August (Port Macquarie Community Health Campus)		
	Board meeting – 11 September (Coffs Harbour Health Campus)		
	 Audit & Risk Committee Update – Barry Shepherd attending YourHealth website presentation – Carolyn Guichard attending North Coast Medicare Local – Tony Lembke & Vahid Saberi attending 		
	Board meeting – 9 October (Coffs Harbour Health Campus)		
	Board training – 16 October (Coffs Harbour Health Campus – 10.30am-2.30pm)		
	NSW Rural Health & Research Congress – 21-23 October (Port Macquarie)		
	Board meeting – 13 November (Macksville District Hospital)		
	MNCLHD Annual Public Meeting – 3 December (Port Macquarie)		
	Board meeting – 11 December (Port Macquarie Base Hospital)		
	2014		
	2014 LHD Board members Conference – Friday 20 June 2014		
M Meeting	Close		
Item 13	There being no further business the meeting closed at 6:00pm		

Minutes: Wednesday, 10 July 2013 Page 7 of 7