

Date: Wednesday, 10 April 2024

Time: 8.30am – 12.00pm

Venue: 35 Grant Street, Port Macquarie

ATTENDANCE AND DECLARATIONS

Welcome and Acknowledgement of Country: Mr P. Treseder AO

Attendance: Mr P. Treseder, Hon L. Hartsuyker, Mr M. Coulter, Mrs J. Zirkler, Mrs S. McGinn, Mr G. Humphreys, Mrs T. Singleton (TEAMs), Dr S. Salindera (TEAMs)

Apologies: Mr S. Dowrick, Dr J. Beange, J. Slaven,

Observers: Dr A. Bailey, Ms J. Wong, Ms K. Vandoros, Ms J. Alaban, Ms D. Kruk, Ms L. Lawrence (Minutes)

Declarations of Interest: Nil

ITEM 1. MINUTES AND ACTION TABLE

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| 1.1 | Minutes of Governing Board Meeting, 13 March 2024

Resolution(s): Mid North Coast Local Health District's (MNCLHD) Governing Board (the Board) endorsed Minutes of the 13 March Board meeting. |
| 1.2 | Action Table April 2024

Resolution(s): The Board accepted progress against action items. |

ITEM 2. STAFF STORY

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| 2.1 | Staff Story – Close the Gap (CTG) Sub-Committee

Resolution(s): The Board thanked the CTG committee for providing a patient story, which demonstrated the impact poor communication can have on a patient's experience. |
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ITEM 3. FOR DISCUSSION

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| 3.1 | Financial Sustainability Plan update

Resolution(s): The Board was updated on the performance of MNCLHD's financial sustainability plan, noting there is a further decline.

Action(s): <ol style="list-style-type: none">To include a one-page dashboard summary showing a monetary figure against each initiative, enabling a quick reference of performance.To provide a summary of how we are tracking to two targets, the efficiency target of \$30m and the end of year financial forecast currently of (\$54m). Tracking should indicate if we have met the monthly targets and if not, what remedial efforts are proposed and how does this effect the end of year financial forecast. |
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	<p>c) Chair to discuss above with CE, along with the suggestions mentioned in points 7.1 and 7.2 for consideration of Phase 2 budgets efficiency measures if these are required.</p> <p>d) The Board is to be updated with the Ministry of Health's (MOH) response to our suggested budget efficiency measures which are to be lodged with MOH no later than 30 April 2024.</p>
3.2	<p>Chief Executive (CE) Summary</p> <p>Resolution(s): The Chief Executive was an apology from the meeting, and the Board took the CE Summary as read. Several questions were taken on notice.</p> <p>Action(s):</p> <ul style="list-style-type: none"> a) How is the CE managing the Leadership Team during this financial recovery stage? b) What percentage of initiatives are revenue focused? c) Why are revenue targets not being met? d) What is the rationale for outsourcing surgery to St Vincent's Hospital and not seeking local solutions?
3.3	<p>Serious Adverse Event Reviews (SAER)</p> <p>Resolution(s): The Board reviewed and accepted the SAER report.</p>
3.4	<p>People Matter Employee Survey (PMES) District action plan</p> <p>Resolution(s): The Board thanked the Director, People and Culture and the team for providing the District action plan.</p> <p>Action(s):</p> <ul style="list-style-type: none"> a) Include specific targets for each Focus area and project, to ensure measuring success is possible. b) The Board expressed continued concern at the high level of racism which exists in the system and asked the Director, People and Culture to provide an update on current initiatives at the May 2024 Board meeting.
3.5	<p>Key Management Personnel (KMP) and Conflict of Interest Declarations</p> <p>Resolution(s): The Board reviewed and accepted the submission, confirming that all documents are current and up to date.</p>
3.6	<p>Financial Sustainability Plan Independent Risk report</p> <p>Resolution(s): The Board reviewed and accepted the Independent Risk report.</p>
3.7	<p>MNCLHD Governing Board Member Skills matrix</p> <p>Resolution(s): The Chair thanked the Board members for completing the skills matrix evaluation, noting the combined document will be kept for any future Board vacancies.</p>



Action(s): Board Chair to review the matrix and identify criteria needed for a successful MNCLHD Board compilation.

ITEM 4. FOR ENDORSEMENT

4.1 MNCLHD Community Engagement action plan

Resolution(s): The Board endorsed the MNCLHD Community Engagement action plan.

Action(s): Consult MNCLHD's Governing Board Stakeholder Engagement plan, to cross-reference activities.

ITEM 5. STANDING ITEMS

5.1 Governing Board Chair's Report – verbal update

- Monthly meetings with NSW Health Secretary
- Update of the Healthcare Service Plan (HCSP) Committee – external engagement meetings are due to start in late April.
- Acronyms need to be appropriately introduced, otherwise papers will not be accepted.
- Correspondence included in Item 9.1 were discussed in detail with proposed responses agreed.
- Recent State Board Conference was discussed.
- An update on the proposed Mid North Coast Rural Health and Medical Research Foundation was provided.
- Current solution with eHealth re our Cyber Security situation was discussed.

5.2 Board Member Staff Meetings

Resolution(s): Nil

5.3 Enterprise Risk Report

Resolution(s): The Board discussed and accepted the report.

Action(s): Incorporate emergency surgery cases as a risk.

5.4 MNCLHD Organisational Report (Service Agreement)

Resolution(s): The Board discussed and accepted the report.

ITEM 6. PRESENTATIONS

6.1 People & Culture Directorate Report – Taresa Rosten

Resolution(s): The Board noted the Directorate paper and thanked Taresa and her team

for the report.

ITEM 7. OPEN DISCUSSIONS

7.1 Director Research & Knowledge – Dr Andrew Bailey

Resolution(s): As Executive Sponsor, Director Research & Knowledge provided an update on the Patient Flow and Operational Efficiency improvement stream, informing the Board there are further significant benefits to be acquired if additional FTE was allocated to this project.

7.2 Director Integrated Care, Allied Health & Community Services -Jill Wong

Resolution(s): Director Integrated Care, Allied Health & Community Services discussed with the Board the opportunity to scale up the Mid North Coast Virtual Care (MNCVC) program, to address the increasing non-acute emergency department presentations (Category 4 and 5).

ITEM 8. SUB-COMMITTEES AND CLINICAL COUNCILS – TO BE TAKEN AS READ

8.1 Board Sub-Committee: Finance and Performance (F&P)

Resolution(s): The Board accepted the March Chair’s Summary, February endorsed minutes and reports.

8.2 Board Sub-Committee: Health Care Quality Committee (HCQC)

Resolution(s): The Board accepted the March Chair’s Summary and endorsed February minutes.

8.3 Board Sub-Committee: Medical Dental Appointments Advisory (MDAAC)

Resolution(s): The Board accepted the March Chair’s Summary and endorsed February minutes.

8.4 Board Sub-Committee: Audit & Risk (ARC)

Resolution(s): The Board accepted the March meeting Summary.

8.5 Board Sub-Committee: Close the Gap (CTG)

Resolution(s): The Board accepted the February Chair’s Summary and endorsed minutes.

ITEM 9. GENERAL BUSINESS / CORRESPONDENCE (TO BE TAKEN AS READ)

9.1 Correspondence to the Board

Resolution(s): The Board discussed recent correspondence to the Governing Board.

ITEM 10. GOVERNING BOARD REFLECTIONS

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| 10.1 | The Board considered discussions and reflected on the presentations and information provided. |
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ITEM 11. CLOSE AND NEXT MEETING

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| 11.1 | The meeting closed at 12.00pm. |
| 11.2 | Next meeting – Wednesday, 8 May 2024
Location: Galambila Aboriginal Health Service, 8 Boambee Street, Coffs Harbour |

ENDORSED



MID NORTH COAST LOCAL HEALTH DISTRICT GOVERNING BOARD MEMBERSHIP

Peter Treseder AO	Chair
Mr Luke Hartsuyker	Deputy Chair
Dr Jennifer Beange	
Michael Coulter	
Gary Humphreys	
Susan McGinn OAM	
Dr Shehnarz Salindera	
Tracy Singleton	
Jennifer Zirkler	

Secretariat

Laney Lawrence	Governing Board Support Coordinator
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Right of Audience and Debate

Stewart Dowrick	Chief Executive
Delwyn Kruk	Manager Governance and Executive Services

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 DISCUSSIONS ARE CONFIDENTIAL

ROLES AND RESPONSIBILITIES OF THE GOVERNING BOARD

The Board provides governance oversight for the local health district, not day-to-day management, or operations. The Board is focused on leading, directing and monitoring the activities of the local health district and driving overall performance. The specific functions of the Board are outlined in the Board Charter (available in Diligent resources) and in Section 28 of the Health Services Act 1997. The Board Chair also has an oversight role in respect of the Chief Executive, in relation to appointment, annual performance agreement and annual performance review as provided for under the Health Executive Service Framework.

GOVERNING BOARD REFLECTION

1. Did we spend the most time on the most important things?
2. Did we add value?
3. How could we have done things better?
4. Any feedback for management?

