

Mid North Coast Local Health District Governing Board Minutes



Date: Wednesday, 13 September 2023

Time: 8.30am – 11.30am

Venue: Kempsey District Hospital

ATTENDANCE AND DECLARATIONS

Welcome and Acknowledgement of Country: Peter Treseder AO

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

Apologies: Dr S. Salindera, Mr S. Dowrick, Ms D. Kruk

Observers: Ms L. Lawrence, Ms L. Dennett, Ms J. Cross, Ms C. Heise, Ms J. Wong, Ms V. Edwards

Declarations of Interest: NIL

ITEM 1. MINUTES AND ACTION TABLE

1.1	Minutes of Governing Board Meeting, 9 August 2023 Resolution(s): The Mid North Coast Local Health District (MNCLHD) Governing Board (The Board) endorsed Minutes of the 9 August meeting.
1.2	Action Table August 2023 Resolution(s): The Board accepted progress against action items.

ITEM 2. PATIENT / STAFF STORY

2.1	Patient Case Study – Close the Gap (CTG) Resolution(s): The Board thanked the Close the Gap committee for sharing the patient story, providing the Board with a very positive story about the Getting Healthy in Pregnancy (GHiP) initiative.
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ITEM 3. FOR DISCUSSION

3.1	Chief Executive's (CE) Summary The Chief Executive's summary provided an update on: <ul style="list-style-type: none">• The Acting CE briefly discussed the recent media attention focusing on a criminal case involving the UK health care system. Reinforced that appropriate systems are in place to ensure early detection within the Mid North Coast Local Health District.• Continued focus of Workforce attraction, including applicants from outside Australia. The LHD is advanced in the planning for onboarding, provision of support and assistance during the resettlement phase, relevant orientation programs and connection to relevant cultural groups/associations locally.• Discussion of the establishment of a Special Commission of Inquiry tasked with conducting a review of healthcare funding in NSW.
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	<p>Resolution(s): The Board accepted the Chief Executive’s Summary.</p> <p>Action(s): The Board enquired about the Scope of Practice for the new Aboriginal Health Practitioner role, with CE to confirm.</p>
3.2	<p>Consumer Compliments and Complaints Report</p> <p>Resolution(s): The Board accepted the report, noting the great results for complaints acknowledgement and closing of matters within set KPIs.</p>
3.3	<p>Attestation Cyber Security</p> <p>Resolution(s): The Board accepted the Attestation.</p>
3.4	<p>Performance Development Review (PDR) Bi-annual Report</p> <p>Resolution(s): The Board accepted the report, acknowledging the District’s completion of PDRs (77%), is above average (51%), however, still below Ministry of Health set target (90%).</p> <p>The Board discussed the report at length, including potential impediments to completing the evaluations.</p> <p>Members requested PDR completion rates of Managers, with whom have direct reports.</p> <p>Action(s): People and Culture Directorate, in collaboration with CE, to determine appropriate Manager level and extract data for report to be submitted to the Board.</p>
3.5	<p>Aboriginal Cultural Safety and Security Framework Implementation Plan</p> <p>Resolution(s): The Board discussed and accepted the update of the three-year plan, noting majority of the actions have been completed.</p>
3.6	<p>MNCLHD Aboriginal Health Dashboard</p> <p>Resolution(s): The Board received the Aboriginal Health Dashboard for the District, with KPIs set by Ministry of Health (MoH). The Board learned that the Aboriginal Health and Primary Partnerships (AHPP) Directorate is currently considering additional District KPIs to ensure local significance and relevance.</p>
3.7	<p>MNCLHD Capital Investment Proposals</p> <p>Resolution(s): The Board discussed and accepted the current list of District Capital Investment proposals.</p>



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3.8	<p>Aboriginal Mental Health patients – KPI update (Action item 4.10 December 2022)</p> <p>Resolution(s): The Board accepted the update.</p>
3.9	<p>Coffs Harbour Refugee Health Service (Action item 3.13 April 2023)</p> <p>Resolution(s): The Board appreciated the update of the current state of the Coffs Harbour Refugee Health Service and thanked the Public Health Directorate for the report.</p>
3.10	<p>MNCLHD Service reviews (Action item 4.7 June 2023)</p> <p>Resolution(s): The Board accepted the Service reviews in progress, and those that have recently concluded.</p>
3.11	<p>Nous Board review recommendations (Action item 4.4 July 2023)</p> <p>Resolution(s): The Board acknowledged the brief and had a lengthy discussion around the recommendations.</p> <p>Action(s):</p> <ul style="list-style-type: none"> a) Recommendation 2.1 & 1.2 - The Board collectively agreed there was a need for a Board Stakeholder Engagement Plan. Board lead, Jenny Zirkler and A/CE will work with Clinical Governance, with reference to the existing Consumer Engagement Mapping Report, to develop a draft one-page plan for submission to the Board at the next meeting, for further discussion. b) Recommendation 2.2, 4.1 & 4.2 – The Chair, Peter Treseder will be responsible for these actions and report as needed via Chair verbal update at Board meetings. c) Recommendation 4.3 – Reviews of Board sub-committees and effectiveness will be added to the Corporate Governance Plan, advising each sub-committee Chair must ensure a yearly review is undertaken and a Summary to be submitted to the Governing Board. d) The Board agreed that all other recommendations were currently being dealt with.

ITEM 4. FOR ENDORSEMENT

4.1	<p>MNCLHD Sustainable Healthcare Framework 2023-2030</p> <p>Resolution(s): The Board received the submission and acknowledged the excellent work that has been done by Carolyn Heise and her team.</p> <p>The Board reflected on the draft document, containing several goals and objectives to be achieved, noting it may be resource intensive. The A/CE noted that the Framework will draw on the support and assistance of clinical and non-clinical “champions” in progressing the actions and the delivery of the Framework. An Implementation plan is required, highlighting specific and measurable indicators, also the risks that need to be considered and understood.</p>
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Members discussed waste reduction in the services area and opportunities for savings around efficiency.

The Board would like to better understand the alignment between the Sustainable Healthcare Framework and the recently endorsed Asset Management Plan (AMP) and Strategic Asset Management Plan (SAMP) documents.

Members recognised the Framework needs to be more explicit regarding the management of low value care activities and processes in the District.

All members agreed a Risk Assessment needs to be completed and submitted to the Board before Endorsement of the Framework will occur.

Action(s):

- a) Development of an Implementation plan with specific actions and measurable indicators
- b) Explore and include waste reduction in the services areas.
- c) Consult with Finance and Performance regarding references of emission reduction in the AMP and SAMP documents and the alignment between the draft Framework and the AMP and SAMP.
- d) Undertake a Risk Assessment on the Framework and submit to Governing Board, along with the Implementation Plan.

4.2 MNCLHD Aboriginal Strategic Framework 2024-2034

Resolution(s): The Board discussed the submission, recognising the large amount of work involved to develop a very thorough and comprehensive document. The Governing Board unanimously endorsed the important Framework.

ITEM 5. STANDING ITEMS

5.1 Governing Board Chair's Report – verbal update

- Board Chair attended the Journey Stories Photographic Exhibition and Short Film launch at Coffs Harbour Health Campus, and the Movements Disorders Service launch at Coffs Harbour Regional Conservatorium.
- The convening of NSW Board Chairs was held virtually and hosted by NSW Health Secretary, Susan Pearce. The meeting provided an update to Board Chairs with current State matters and the upcoming release of the 2024 Budget.
- The Board Chair spent time with the Integrated Care, Allied Health and Community Services team during their recent Senior Leadership Workshop.

5.2 Board Member Staff Meetings

Resolution(s): The Board noted the meeting with staff and the updates provided.

5.3 Enterprise Risk Report

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	<p>Resolution(s): The Board discussed and accepted the report.</p>
5.4	<p>MNCLHD Organisational Report (Service Agreement)</p> <p>Resolution(s): The Board discussed and accepted the report.</p> <p>Action(s): CE to provide advice on the performance for Mental Health KPI: Acute post-discharge community care (follow-up within 7 days).</p>
ITEM 6. PRESENTATIONS	
6.1	<p>Ms Jacqui Cross, Chief Nurse and Midwifery Officer, NSW Ministry of Health</p> <p>Resolution(s): The Board Chair thanked Ms Cross for providing the Board with an informative presentation of NSW Nursing and Midwifery key focus areas including workforce pipelines, retention factors and scope of practice.</p>
6.2	<p>Integrated Care, Allied Health and Community Services Directorate Report (ICAHCS) Ms Jill Wong, Director ICAHCS</p> <p>Resolution(s): The Board noted the Directorate paper and thanked Jill and her wider team for the comprehensive report.</p>
ITEM 7. SUB-COMMITTEES AND CLINICAL COUNCILS – TO BE TAKEN AS READ	
7.1	<p>Board Sub-Committee: Finance and Performance (F&P)</p> <p>Resolution(s): The Board accept the August Chair’s Summary, Endorsed July Minutes and July FOAM Report.</p>
7.2	<p>Board Sub-Committee: Health Care Quality Committee (HCQC)</p> <p>Resolution(s): The Board accepted the August Chair’s Summary and Endorsed July Minutes.</p>
7.3	<p>Board Sub-Committee: Board Sub-Committee: Medical Dental Appointments Advisory (MDAAC)</p> <p>Resolution(s): The Board accepted the August Chair Summary and Endorsed July Minutes.</p>
7.4	<p>Board Sub-Committee: People and Culture (PAC)</p> <p>Resolution(s): The Board accepted the June Chair’s Summary and Endorsed Minutes.</p>
ITEM 8. GENERAL BUSINESS / CORRESPONDENCE (TO BE TAKEN AS READ)	
8.1	<p>Correspondence to Governing Board</p>



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Resolution(s): The Board discussed and noted the correspondence.

ITEM 9. GOVERNING BOARD REFLECTIONS

- 9.1 Suggestions:
- a) Include a short morning tea break on agenda
 - b) Start the meeting with CE providing a maximum five minute verbal update on any local 'topical issues' of location of meeting.

ITEM 10. CLOSE AND NEXT MEETING

- 10.1 The meeting closed at 11.45am
- 10.2 Next meeting – Wednesday, 11 October 2023
Location: Port Macquarie Base Hospital

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 DISCUSSION 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 here) 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?

