

MEETING MINUTES - CONFIRMED

Wednesday, 13 November 2013

Commencing 3:30pm

Macksville District Hospital – Community Health Centre

& Videoconference: CHHC - EDU020, PMBH - NCCI, Lismore - Mental Health

ITEM / DESCRIPTION		ACTION REQUIRED	
A Attendance and Declarations			
<u>Welcome:</u> Warren Grimshaw, Chair			
Present: Warren Grimshaw Chair (WG), John Barrett (JB), Stephen Begbie (SB), Richard Buss (RB), David Kennedy (DK), Neville Parsons (NParsons), Neil Porter (NPorter), Janine Reed (JReed), Jo Sutherland (JS), Jan Ryan (JRyan)		For Noting	
Apologies: Nil		For Noting	
In Attendance: Stewart Dowrick, Chief Executive (SD), Vanessa Edwards, (VE), Cathy Osborne (CO), Steve Rodwell (SR), Mary Malouf (MM) Secretariat, Danny Ryan (DR), Chair Macksville MSC (until item 4.2), Robyn Martin (RM)		For Noting	
Declaration of Pecuniary Interest, Conflict of Interest and Related Transactions: <u>Continuing:</u> <ul style="list-style-type: none"> Janine Reed in relation to Nambucca Valley Care and specifically Renal Services at Macksville. 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. <u>New:</u> <ul style="list-style-type: none"> Richard Buss in relation to Hosted and Held Services 		For Noting	
B Presentations			
Item 1	Presentations/Guests		
	1.1	Oral Health – Cathy Osborne, Manager Healthy Communities and Oral Health	For Discussion
	General information in relation to the dental services and discussion included: <ul style="list-style-type: none"> Noted partnership money and distribution of funds. Allocation to Charles Sturt University (CST) to expand community oral health services in the electorate of Lyne, utilising 4th and 5th year dentistry student placements. Discussion in relation to the Spencer Program (Aged Care). KPI's are being achieved in most areas. Noted activities under way in relation to Prevention and Promotion - Projects. Discussion regarding the distribution of dental chairs as compared to the distribution of disease rate. The disease rate is not confirmed. The CE provided more information in relation to how the distribution was determined. Additional information in relation to dental chairs equivalents will be provided to the Board. Discussion in relation to fluoridation and whether outcomes/results will have any influence on Council's decisions to provide fluoridated water. 		
	<u>Resolution:</u> That the Governing Board note the information provided in the presentation. CONFIRMED WITHOUT DISSENT		
	1.2	Patient Story (Standing item)	For Discussion
Steve Rodwell presented the patient story.			

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	<p>This story was representative of a Surgical Ward female patient approximately 75 years of age. This was the story of her cancer treatment, which she was able to have while travelling.</p> <p><u>ACTION ITEM:</u></p> <p><i>In relation to the last point it was agreed:</i></p> <ul style="list-style-type: none"> <i>JS and SR to review options for information to be presented to the HCQC to advance quality outcomes.</i> <i>Develop a method to monitor the risk via MDAAC.</i> <p><u>Resolution:</u> That the Governing Board note the information presented in the Patient Story.</p> <p>CONFIRMED WITHOUT DISSENT</p>	
C Minutes of Governing Board		
Item 2	<p>2.1 Minutes of previous Meeting - Approval of Minutes from meeting of 9 October 2013</p> <p>Noted that David Kennedy was at the CTG Forum in Sydney and was therefore an apology for the October 2013 Meeting.</p> <p><u>Resolution:</u> That the Minutes of the Governing Board's meeting of 9 October 2013 be confirmed as a true and accurate record.</p>	For Endorsement
D Business Arising		
Item 3	<p>Action Table and follow up</p> <p>3.1 Action Table Items on the Action Table all form part of the Strategic Plan. It was therefore noted that the January 2014 Governing Board Meeting will be a Strategic Planning Meeting.</p> <p><u>ACTION ITEM:</u></p> <ul style="list-style-type: none"> <i>SD to coordinate for Sue Carter (if available) to facilitate the Strategic Planning Meeting.</i> <p><u>Resolution:</u> That the Governing Board endorse and note the actions.</p> <p>CONFIRMED WITHOUT DISSENT</p>	For Noting
E Chief Executive's Report		
Item 4	<p>4.1 Chief Executive's Report for October 2013 (and attachments)</p> <p>General discussion in relation to areas listed in the CE's Report:</p> <p>Breast Screening</p> <ul style="list-style-type: none"> Noted that targets have been increased within existing budgets. The Board agreed that this may need to be taken up by the Chair with further discussions with the Ministry. Discussion in relation to how we can introduce new services in an ABF environment. <p>New Palliative Care Model</p> <ul style="list-style-type: none"> The official launch of the new state wide palliative care model will be in CHHC on 6 December. <p>North Coast GP Training</p> <ul style="list-style-type: none"> The Board endorsed the signing of the MoU as detailed in the report North Coast GP Training. <p>Health and Innovation Awards</p> <p><u>ACTION ITEM:</u></p> <ul style="list-style-type: none"> <i>Write to the four nominees from MNCLHD and congratulate them in relation to Health and Innovation Awards.</i> 	For Discussion

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<p><u>CETL</u></p> <ul style="list-style-type: none"> • <i>Write and Congratulate SD and KR on the success of the program.</i> <p><u>2013/14 Service Agreement and Activity Targets</u> MNCLHD Performance:</p> <ul style="list-style-type: none"> • Discussion in relation to 2013/14 budget. • Doctors and clinicians need further education in relation to the financial impact of unplanned readmissions. Speak to MSC's in relation to this. • Reinforce the commitments of NCML to attract medical staff/GP's to the district. • National Quality and Performance Framework – The Executive have agreed that MNCLHD will be going for accreditation as 'whole of district' in April. • EOI – Surgical Futures – The LHD will be asked to review this EOI. <p><u>ACTION ITEM:</u></p> <ul style="list-style-type: none"> • <i>Medicare Locals - Identify and report back in relation to the work carried out by Medicare Locals.</i> • <i>Accreditation - Seek advice on the process in relation to applying for accreditation as a LHD. This process is then to be reported monthly to the Board from the CE.</i> <p><u>Vascular Surgeon CHHC</u></p> <ul style="list-style-type: none"> • Noted that interest had been expressed and the position to be re-advertised. 			
4.2	Chief Executive's Traffic Light Report	For Noting	
<ul style="list-style-type: none"> • The Board noted the impact of the overall funding position of the MNCLHD for 2013/14. • There was discussion in relation to the impacts. This again reiterates the need for special grants/funding for MNCLHD for new services. <p>The Board noted the information contained in the report 4.2.</p> <p>Resolution: PMBH - Board to approve the proceeding of the initial tender process for the development of intervention and cardiac services in Port Macquarie. This decision will need to be taken into account with the 2014/15 budget discussions.</p> <p>CONFIRMED WITHOUT DISSENT</p>			
4.3	Chief Executive's Performance Indicator Report (October 2013)	For Noting	
<p>The Board noted the information contained in the report 4.3.</p> <p>Resolution: That the Governing Board receive and note the information provided in Item 4.</p> <p>CONFIRMED WITHOUT DISSENT</p>			
<p>F Strategic Matters for discussion and/or endorsement</p>			
Item 5	Standing Items		
	5.1	Budget	No Items
	5.2	MDAAC Performance Report Jan to June 2013 Health Services Development and Innovation Committee Performance Report 2013 Community Engagement Sub Committee Performance Report 2013	For Discussion
	Other items		
	5.3	Outcomes from Board Training Day: NSW Health Boards Training Program Workshop Evaluation Report – Coffs Harbour 16 October 2013	For Discussion
	<ul style="list-style-type: none"> • The Board noted the positive outcomes from the training day. • It was agreed that these outcomes will be incorporated into the Strategic Planning process. <p>Resolution: That the MNCLHD Governing Board notes the information and outcomes documented from the Training Day.</p>		

ITEM / DESCRIPTION		ACTION REQUIRED	
CONFIRMED WITHOUT DISSENT			
5.4	Brief Clinical Services Plan Clinical Services Plan Collated Response Table Clinical Services Plan (previously submitted – electronic copy attached for reference)	For Endorsement	
<p>General discussion included:</p> <ul style="list-style-type: none"> • Query in relation to the questions on the Clinical Services Plan feedback form. • Noted the comments received from the Mayor and Councilors of Nambucca Shire in relation to the plan. • Noted the concerns in relation to security at PMBH –MNCLHD will implement actions to strengthen security. • Discussion in relation to allocating funds in line with community needs. • Discussion in relation to the challenges of GP's not being able to treat children (they now need to be treated by a paediatrician). • The issue in relation to lack of paediatric services for Kempsey was discussed. • It was noted that Paediatrics was one of the six themes for the Health Innovation Committee. • The question was raised as to consultation process with doctors at Kempsey during the development of the Clinical Services Plan. • Chair noted that opportunities were provided for input through the MSC. • Noted that travelling is still required for some cancer patients with a 100km round trip for cancer services in some circumstances (South West Rocks/Kempsey). <p><u>ACTION ITEM:</u></p> <ul style="list-style-type: none"> • <i>Note that there are specific items which will require monitoring and follow up.</i> 			
Resolution: That the MNCLHD Governing Board endorse the Clinical Services Plan and make this available to staff and the community.			
CONFIRMED WITHOUT DISSENT			
5.5	MNCLHD Delegations Manual (previously submitted – electronic copy attached for reference)	For Endorsement	
Resolution: That the MNCLHD Governing Board endorse the MNCLHD Delegations Manual for distribution to staff.			
CONFIRMED WITHOUT DISSENT			
5.6	2012/13 Operational Plan Update Brief MNCLHD Operational Plan 2012/13 EOY Reporting 2013/14 Operational Plan Update Brief MNCLHD Operational Plan 2013/14 - Draft	For Endorsement	
Resolution: That the MNCLHD Governing Board endorse both the 2012/13 and 2013/14 MNCLHD Operational Plans.			
G Directorate Updates			
Item 6	Directorate Updates		
	6.1	Mental Health & Drug and Alcohol	For Noting
	6.2	Allied Health & Hosted Clinical Services	For Noting
	6.3	Public Health	For Noting
	6.4	Aboriginal Health & Primary Partnerships	For Noting
	6.5	Nursing, Midwifery & Workforce	For Noting

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	<ul style="list-style-type: none"> Regarding 6.5 Nursing, the new requirements for nursing staff over 45 years of age to undergo a physical/health check and whether this could be regarded as discrimination. SR noted that this had been investigated and is not a discrimination issue. Noted there are currently 3 court matters under way - 1 being unfair dismissal, 1 is a section 186 being contract dispute (this case is going before the supreme court), and 1 being health services union in relation to length of time it took to resolve an employee's grievance against another employee. 	
6.6	Clinical Governance & Information Services	For Noting
6.7	Financial Operations <ul style="list-style-type: none"> ABF (Standing item) 	For Noting
6.8	Executive Support & Strategic Relations (next due Dec)	For Noting
6.9	Hastings Macleay Clinical Network	For Noting
Capital Works		
6.10		No Items
H Recommendations from Governance Committees		
Item 7	Finance and Performance Committee	
7.1	Confirmed Minutes of Meeting – 24 September 2013	For Noting
7.2	Chair – Summary	For Noting
Noted the finance committee report. Notion of incentivizing behavior to achieve the right outcome.		
Health Care Quality Committee		
7.3	Confirmed Minutes of Meeting - 16 September 2013	For Noting
7.4	Chair – Summary of 21 October 2013	For Noting
Noted there has been some reporting 'glitches' from other committees resulting in some information not being reported sufficiently to the HCQC meetings. This issue has now been corrected. Resolution: That the Board accept the recommendation contained in the committee minutes. CONFIRMED WITHOUT DISSENT		
MDAAC		
7.5	Confirmed Minutes of Meeting – 10 October 2013	For Noting
7.6	Recommendations Approval & Critical Action Compliance Declarations from 10 October 2013	For Noting
7.7	Chair – Summary of 10 October 2013	For Noting
There was discussion in relation to the number of resignations at PMBH. SD advised this is due to the expiration of contracts.		
Workforce, Health & Safety Committee		
7.8	Confirmed Minutes of Meeting – 16 September 2013	For Noting
7.9	Chair – Summary of 16 September 2013	For Noting
<ul style="list-style-type: none"> The Chair queried if the Board should receive a separate report in relation to Health and Safety. Noted some changes have been implemented ie Blue Books for security staff so they can record 'take downs'. SB – in relation to the care of bariatric patients. Discussion as to whether we should be training on real patients as opposed to mannequins. SR noted that this is tied in with staff being able to be approved with competencies. 		

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	<ul style="list-style-type: none"> Discussion in relation to BRH being the highest hospital identified in relation to risk from bushfires. SD to query and report back. A report will be provided in relation to previously identified risks and whether actions have been taken to improve. <p><u>ACTION ITEM:</u> SR to provide a report to Board detailing specific complaints and incidents of WHS over the past 6 months.</p>	
Health Services Development & Innovation Committee		
7.10	Confirmed Minutes of Meeting – 18 October 2013	For Noting
7.11	Chair – Summary of 18 October 2013	For Noting
	<ul style="list-style-type: none"> SB – Community Nursing Services – plan for more work to develop this in 2014. Noted funding of \$20,000 for 5 awards for projects to develop innovation in our region. 	
Close the Gap Committee (no items -next meeting November 2013)		
7.12	Confirmed Minutes of Meeting –	No Items
7.13	Chair – Summary	No Items
Community Engagement Committee		
7.14	Confirmed Minutes of Meeting – 2 October 2013	For Noting
7.15	Community Reference Group – Minutes of Meeting	No Items
7.16	Community Connections Report	No Items
7.17	Chair – Summary	No Items
	<ul style="list-style-type: none"> Noted that JRyan and JReed will meet with the auxiliary committee in the near future. JRyan informed the Board that the CRG meeting scheduled for last Thursday had to be cancelled due to there being such a small number of attendees (5 people). Noted that JRyan and JReed will hold a Community Connections meeting in the near future. Also note that the community group concerned with the provision of renal services will be invited. Noted the need to improve this group and make it stronger. (Has not functioned properly since April 2012). Raised the issue of the need for suitable administration support for Community Engagement. Feedback/information is to be sought from other districts as to how they manage their CRG and Community Engagement. It was noted that the MNCLHD was a small district with limited resources and that efforts had been made to improve the position. <p><u>Resolution:</u> Adopt the recommendation included in the meetings to have 2 separate network meetings (CHHC and PMBH).</p> <p>SD and KR to further discuss/improve the possibility of engaging secretariat support.</p> <p>CONFIRMED WITHOUT DISSENT</p>	
	<p><u>Resolution:</u> That the Governing Board receive and note the information provided in Item 7.</p> <p>CONFIRMED WITHOUT DISSENT</p>	
I Workplace Culture Action Plan		
Item 8	8.1 Your Say Strategies – reporting MNC	For Discussion
	<p>SR gave a Powerpoint Presentation on the outcomes of the MNCLHC Your Say 2013 Workplace Survey Results. The Board noted the key outcomes/results:</p> <ul style="list-style-type: none"> Overall we have improved in most areas although are still behind some other districts. The key area of improvement is in relation to Middle Managers. Lowlights – Managers are also the least positive response area. Communication proving to be the 	

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	<p>main area needing improvement.</p> <ul style="list-style-type: none"> Unacceptable Behavior – Abuse - There is still a large number of people responding that they have been verbally abused. Unacceptable Behavior – Discrimination – still a large number of people claiming to have experienced discrimination. Discussion in relation to results generally by location/site and staff level. Noted that engagement for the survey was satisfactory however organisational culture needs improvement. Noted that from the Board’s perspective there is an interest in improving middle management. 	
8.2	Workers Compensation Report (Due December 2013)	No Items
Resolution: That the Governing Board receive and note the information provided in Item 8.		
J Quality & Safety		
Item 9	9.1	No Items
K For Information of the Board (Discussion by exception)		
Item 10	Items to be noted	
	10.1	LHD Board Remuneration – Approval
	10.2	Chief Executives 2013/14 Performance Agreement
	Resolution: That the Governing Board receive and note the information provided in Item 10.	
	CONFIRMED WITHOUT DISSENT	
L General Business		
Item 11	Questions on Notice, Correspondence & Other Business	
	11.1	Confidentiality (standing item)
	11.2	Presentation to Macksville Council Resolution: That the Governing Board resolve on an action plan for Macksville and the way on which we consult. Peter Flemming to present the master plan to the Board in early 2014. CONFIRMED WITHOUT DISSENT
	11.3	Coffs Harbour Health Campus - Parking
	<ul style="list-style-type: none"> SD noted a recent discussion in relation to the car park at CHHC. SR had advised staff in relation to proposals for car parking facilities at CHHC. 	
M Upcoming visits and events		
Item 12	2013	
	MNCLHD Annual Public Meeting – 3 December (Port Macquarie)	
	Board meeting – 11 December (Port Macquarie Base Hospital)	
	2014	
	Board meeting – 15 January (Coffs Harbour Health Campus)	
	Board meeting – 12 February (Wauchope Health Campus)	
	Board meeting – 12 March (Macksville District Hospital)	
	Board meeting – 9 April (Port Macquarie Base Hospital)	

ITEM / DESCRIPTION		ACTION REQUIRED
	Board meeting – 14 May (Coffs Harbour Health Campus)	
	Board meeting – 11 June (Port Macquarie Community Health Campus)	
	MNCLHD Innovation Awards – proposed date 12 June 2014	
	2014 LHD Board members Conference – Friday 20 June 2014	
	Board meeting – 9 July (Dorrigo Multipurpose Service)	
	Board meeting – 13 August (Kempsey District Hospital)	
	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)	
	Board meeting – 10 December (Coffs Harbour Health Campus)	
N Meeting Close		
Item 13	There being no further business the meeting closed at 7.00pm	