



MEETING MINUTES (CONFIRMED)

Wednesday, 14 December 2016 Commencing 3.00pm

Coffs Harbour Health Campus: ED025

em / Descr	IPTION		ACTION	CARRIAGE	Αττ Νο
Attendand	e and D	eclarations			
Welcome	: Warre	n Grimshaw AM, Chair.			
١	Whitefor	Grimshaw Chair (WG), Neil Porter (NPorter), Jan Ryan (JRyan), E rd (GW), Janine Reed (JR), Elizabeth Ruthnam (ER), Stephen Beg		1 1.	and (JS), Ga
		Parsons (NParsons)			
In Attend Tankel	ance: Ke	en Barker (KB), Stewart Dowrick (SD), Vanessa Edwards (VE), Lyn	n Lelean (LL), H	Kathleen Ryan (K	R), Alan
		cuniary Interest, Conflict of Interest and Related Transactions			
1 •	No new o	declarations were made.			
Presentati	ons (1 h	our)			
ltem 1	Preser	ntations/Discussions			
	1.1	 Presentation – Rural Health Video Lynn Lelean, Manager Media & Corporate Communications Carolyn Guichard, Manager Integrated Multi Media Unit Video was shown at Annual Public Meeting – noted with 	Noted	Chair	1.1
	1.2	appreciation. Audit and Risk Update	Noted		
		 Ken Barker – Audit and Risk Committee Chair KB spoke to the presentation and current situation since commencing as Independent Chair of the Audit and Risk Committee. Issues highlighted particularly with human resource matters relating to leave and accrual. Spoke of issues with the rollover of information to the systems and guarantee by HealthShare that employee information transfer was safe however the resulting conflict with information is evident. KBarker spoke of the financial matters and Special Trust Fund issues. WG – major responsibility of risk and quality rests with clinical governance and that they are being dealt with appropriately. KR confirmed that of all the risks raised by the A&RC / KBarker that the HCQC could demonstrate that all risks had been covered and discussed. KB confirmed to JS question that how are we identifying that the risks identified are the priorities of the Audit and Risk Committee. 			12



	RIPTION		Action	CARRIAGE	ATT NO.
		 KB confirmed that will be the process for IAU to liaise with CGU to ensure that these are the priorities of the A&R Committee. SD confirmed that is what occurs now. NP – area of major risks is procurement is this on the table or done previously. KB – will follow this up and advise accordingly. Reporting of Top 10 Risks – MoH take their time acknowledging what these are and there a huge variance with what is reported up to MoH by LHDs. What is the purpose of reporting up the top 10, why not the risks that are strategic to the LHD. Discussion occurred around the impact of identifying the risks and reporting up to MoH and how this evolves for the LHD. Chair noted that the Audit & Risk Committee was now a Sub-Committee of the Governing Board and Board to nominate member/s to the committee. ACTION: Nominate Board member to attend the Audit and Risk Committee. This to undertaken (as part of the 'refresh of Committee Chairs and members to all Sub-Committee and other requiring Board representative) in January 2017. 			
	Resolut	ion: That the Governing Board receive and note the informati	on provided in	Item 1 - CONFI	RMED
C Minutes c	of Govern	ing Board	1		-
Item 2	2.1	Minutes of Meeting 9 November 2016	Endorsed	Chair	<u>2.1</u>
		<u>tion</u> : The Minutes of the Governing Board's meeting of 9 Nove te record - CONFIRMED	ember 2016 we	ere confirmed a	as a true an
D Business	Arising				
	U				
Item 3	-	Table and follow up			
Item 3	-	Table and follow up Action Table	Endorsed	Chair	<u>3.1</u>
Item 3	Action	Action Table Brief: Risk Register Update	Endorsed	Chair	See Iten 5.3
Item 3	Action 3.1	Action Table	Endorsed Noted	Chair	See Iter



	RIPTION		ACTION	CARRIAGE	Αττ Να
Chief Exe	cutive's F	Report			
Item 4	4.1	Chief Executive's Report and Attachments:	Noted		<u>4.1</u>
	1		Noted For Discussion		4.1 4.2



RIPTION		ACTION	CARRIAGE	Αττ Ν
Resolu	tion: The Governing Board receive and noted the information	provided in Item 4	4.	
Matters	for discussion and/or endorsement			
	ing items			1
5.1 5.2	Budget Premier's Priorities for Health:	No itoma	Chair Chair/CE	
5.2		No items	Chair/CE	
	Improving service levels in hospital			
	NEAT Deale Activity Team (DAT)			
	 Peak Activity Team (PAT) NEST 			
	 Tackling Childhood Obesity 			
	 Reducing Domestic Violence 			
5.3	Risk Management Progress	Noted	Chair	5.3
5.5	KR noted this is update of the work undertaken and	Noted	Chan	<u>3.5</u>
	including directorate workshop. The District now has an			
	agreed process moving forward. Feedback is being			
	strengthened with the committees and there has been good			
	discussion and ideas in this area.			
	WG – noted top 10 to be reviewed through SET which CE			
	confirmed.			
	ACTION: noted top 10 risks to be reviewed by the Senior			
	Executive and KR doing further review into this and further			
	possibilities.			
	CE sought feedback from Board members and views ER gave			
	feedback that it was well prepared and widely consulted			
	and came forward as good process.			
	NPorter noted that he felt he was looking at a risk register			
	of another organisation as he felt it didn't truly reflect			
	where the organisation was at.			
	CE noted appreciated feedback and noted the work the LHD			
	has achieved in this space.			
	DK supported Neil's comments around Closing the Gap KRI –			
	didn't feel it was interpreted correctly.			
	WG – two issues – appropriate emphasis on clinical			
	governance as we need further in governance in this area.			
	The other matter was the Top 10 risks for the organisation.			
	JB confirmed thoughts with David and Neil and felt the			
	language didn't quite reflect the tenor of the organisation.			
	ution: That the Governing Board Governing Board receive and	note updates in r	elation to the	Standir
Other	- CONFIRMED			
other	Brief: Draft MNCLHD Strategy – Caring for Older People	Final arrest 11	Chai	
	 Draft Strategy – Caring for Older People 	Endorsed with	Chair	5.4
5.4		recommendati ons		<u>5.4a</u>
	Chair commended the team, this is an excellent document.	0113		



ITEM / DESC	RIPTION		ACTION	CARRIAGE	ATT NO.
		Recommendation:			
		Document to go to MSC and CRG			
		Authors to present following consultation			
		• Provide schedule of actions and have further discussion			
		by having them team presenting to the Board.			
		• Something to add here about older people moving			
		away from care base for retirement therefore not			
		having that support base.			
		ACTION – to be distributed for further consultation and			
		presentation scheduled in 2017.			
	<u>Resolu</u>	<u>ution:</u> That the Governing Board support the recommended ch	anges - CONFIRM	ED	
		Brief: Patient Safety			
		Brief noted however Jo Sutherland noted we need to have standing item as Quality.			
		CE noted agreed and this will be adopted alongside patient centred focus.			
		Equitable access to care			
		Patient Centred care			
		Safety			
		 Effectiveness – value and outcomes 			
		• Effectiveness – value and outcomes			
	5.5	Agreed for the Board to review 2-3 of the accreditation standards at each meeting in the lead up to accreditation in 2017.	Noted	Chair	<u>5.5</u>
		Complaints reporting (analysis) to be [provide to the Board on a quarterly basis.			
		Discussion occurred within the forum regarding Health Economics and demonstrating the costs that are incurred by the LHD with tests etc and understanding efficiencies around packaging and bundling of tests etc.			
	Resolu	<u>ution:</u> The Governing Board noted the information update in t	he above brief - C	ONFIRMED	
		Health Legislation Amendment Act 2016			
	5.6	CE provided overview of the changes. This relates to the HES/Contract positions.	Noted	Chair	<u>5.6</u>
	Resolu	<u>ution:</u> The Governing Board noted the information update in the second se	ne above brief.		
		Senior Executive Forum Presentations			
	5.7	Rural Health	Noted	CE	57
	5.7	 Rural Health Close the Gap 	NOLEO		<u>5.7</u> 5.7a
	Resolu	ution: The Governing Board noted the information update in the second	ne above brief – C	CONFIRMED	<u>3.78</u>
G Directora	ate Updat	es			
Item 6	-	orate Updates			
	6.1	Mental Health & Drug and Alcohol	Noted		<u>6.1</u>
	1	1	1	1	1



TEM / DESCR			ACTION	CARRIAGE	ATT NO.			
	6.2	 Allied Health & Integrated Care HealthPathways Conference Summary Healthy Kids Bus Stop Summary Macksville Garden Gala 	Noted		<u>6.2</u> <u>6.2a</u> <u>6.2b</u> <u>6.2c</u>			
	6.3	Public Health	Noted		<u>6.3</u>			
	6.4	Aboriginal Health & Primary Partnerships	Noted		<u>6.4</u>			
	6.5	Nursing, Midwifery & Workforce	Noted		<u>6.5</u>			
	6.6	 Clinical Governance & Information Services Incident Management Report HCQC Data Report Patient Safety and Quality Report 	Noted		<u>6.6</u> 6.6a 6.6b 6.6c			
	6.7	Financial Operations and Asset Management	Noted		<u>6.7</u>			
	6.8	Communications & Strategic Relations Alignment Board Sub Committees 	Noted		<u>6.8</u>			
	6.9	Coffs Clinical Network Report	Noted		<u>6.9</u>			
	6.10	Hastings Macleay Clinical Network Report	Noted		<u>6.10</u>			
	<u>Resolut</u>	tion: The Governing Board receive and noted the information	provided in Item	6 - CONFIRME	D			
H Recomme	ndation	s from Governance Committees						
ltem 7	Financ	e and Performance Committee						
	7.1	Endorsed Minutes of Meeting – 6 December 2016	Noted		<u>7.1</u>			
	7.2	Chair – Summary JB noted the level of unfavourability at Base Hospitals. Pressure on Coffs Harbour is significant.	Noted		<u>7.2</u>			
	Health Care Quality Committee							
	7.3	Confirmed Minutes of Meeting – 31 October 2016	Noted		<u>7.3</u>			
	7.4	Chair – 28 November 2016 Summary JS noted issues highlighted in the summary.	Noted		<u>7.4</u>			
	MDAA	c	ł	1				
	7.5	Endorsed Minutes of Meeting –13 October 2016	Noted		<u>7.5</u>			
	7.6	CACD & Recommendations	Noted		<u>7.6</u>			
	7.7	Chair – Summary JB thanked Stewart for addressing the Quinquennial process with recruiting support to this role. Confident we are well placed to meet the quinquennial process this year.	Noted		7.7			
	Workf	orce, Health & Safety Committee						
	7.8	Confirmed Minutes of Meeting – 21 November 2016	Noted		<u>7.8</u>			
	7.9	Chair – Summary NPorter noted the action with Workers Comp claims and appears to be on track.	Noted		<u>7.9</u>			
	Health	Services Development & Innovation Committee						



Image: state of the solution of the solutions update No items 7.13 Community Engagement Committee 7.15 Endorsed Minutes of Meeting – next meeting No items 0 7.16 Community Reference Group Minutes No items 7.16 Community Connections Update No items 7.17 Community Connections Update No items 7.18 7.18 7.18 7.18 Chair – Summary For Noting 7.18 7.18 7.18 Chair – Summary For Noting 7.18 7.19 Community Connections Update No items 7.18 7.19 Community Connections Update No items 7.18 7.19 Community Connections Update No items 7.18 1 Quality &	ITEM / DESCR	RIPTION		Action	CARRIAGE	ATT NO.	
SB noted that work and research being undertaken as part of this program has the potential to be part of the solution for ongoing pressure on acute care services. Noted 7.11 Close the Gap Committee 7.13 Confirmed Minutes of meeting – 18 October 2016 Noted 7.13 7.14 Chair – Summary DK recommend the MNCLHD make the issues with provision of health services to the Bowraville population a priority. No Items 7.14 Community Engagement Committee 7.15 Endorsed Minutes of Meeting – next meeting No Items 9 7.15 Endorsed Minutes of Meeting – next meeting No Items 9 9 7.15 Endorsed Minutes of Meeting – next meeting No Items 9 9 7.16 Community Reference Group Minutes No Items 9 9 9 7.18 Chair – Summary For Noting 7.18 7.18 7.18 7.18 7.18 1.18<			• 7 October 2016				
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	M Upcomin	g visits a	nd events (NIL Items)				
There being no further business the meeting closed at 6.00pm	There being	no furth	er business the meeting closed at 6.00pm				