

Endorsed Meeting Minutes

DATE: Wednesday, 10 August 2022

TIME: 11.00am – 3.30pm

VENUE: Port Macquarie Base Hospital

Item / Description

Attendance and Declarations

Welcome: Hon. L. Hartsuyker (Deputy Chair)
Acknowledgement of Country: Hon. L. Hartsuyker

Present: Dr J. Beange, Prof H. Cavanagh (TEAMS), Mr M. Coulter, Dr T. Francis (TEAMS), Hon L. Hartsuyker, Mr G.

Humphreys, Mrs S. McGinn, Dr A. Seccull (TEAMS), Mrs T. Singleton, Mrs J. Zirkler

In Attendance: Mr S. Dowrick, Ms D. Kruk, Ms B. White

Apologies: N. Porter

Observers:

Catharine Death, Hastings Macleay Clinical Network Coordinator (TEAMS)

Rebekah Florence, Director People and Culture

Melanie Mearns, A/Director Internal Audit, Risk and Compliance

Dr Kerry Chant, Chief Health Officer, Deputy Secretary Population and Public Health, NSW Health (presentation)

Dr Paul Douglas, Director Public Health (presentation)

Dr Fiona Leslie, Chair Port Macquarie Base Hospital Staff Council (presentation) (TEAMS)

Dr Michael Su, Chair Coffs Harbour Health Campus Staff Council (presentation) (TEAMS)

Dr Peter Ackerley, Chair Kempsey District Hospital Staff Council (presentation) (TEAMS)

Declarations of Interest: Hon. L. Hartsuyker – Serena Russo Group. G. Humphreys – Garden Village Board

Item 1. Presentation

- 1.1 Dr Kerry Chant Chief Health Officer and Deputy Secretary Population and Public Health
 - The Governing Board thanked Dr Chant for the presentation.
 - The Governing Board noted the priorities including vaccinations, oral health, preventable diseases, smoking, obesity and alcohol and other drug services.

Resolution(s): The MNCLHD Governing Board noted the Deputy Secretary's presentation.

Action(s):

a) Provide the Governing Board with information on the utilisation of Aboriginal Adult and Children Oral Health programs and waitlists.

Item 2. In-Camera Session for Discussion/Presentations

2.1 Nil.

Item 3. Employee Story

3.1 Employee Story – Recovery at Work Coordinator

The Governing Board noted the employee story.



Item 4	. Minutes and Action Table
4.1	Minutes of Governing Board Meeting 8 June 2022
	Resolution(s): The MNCLHD Governing Board endorsed Minutes of the meeting 8 June 2022.
4.2	Action Table August 2022
	Update provided by the Chief Executive on the Preventing Racism Project.
	Resolution(s): The MNCLHD Governing Board accepted progress against action items.
	Action(s): a) Provide the Governing Board with an update on the Preventing Racism Project at the December 2022 meeting.
4.3	Confirmation of Agenda
	Resolution(s): No amendments to agenda.
Item 5	5. For Endorsement and/or Discussion
5.1	Mental Health Patients in the Emergency Department (Action Item 6.3a May 2022 meeting)
	Resolution(s): The MNCLHD Governing Board noted the Mental Health Patients in the Emergency Department paper.
	Action(s): a) Provide the Governing Board with an update on the Emergency Mental Health Acute Response Team (EMHAART) program.
5.2	Performance and Talent Update (Action Item 4.6a May 2022 meeting)
	The Performance Development Review Update was discussed in detail.
	Resolution(s): The MNCLHD Governing Board noted the Performance and Talent Update.
	Action(s):a) Provide the Governing Board with Performance and Talent update by Directorate.b) Include completion rates for previous year for comparison and timeframe for targets.
5.3	Governance of Public Patients on Surgical Waitlists (Action Item 5.7a June 2022 meeting)
	Resolution(s): The MNCLHD Governing Board noted the Governance of Public Patients on Surgical Waitlists paper.
5.4	Corporate Governance Attestation
	The Corporate Governance Attestation was discussed.



	Resolution(s): The MNCLHD Governing Board endorsed the Corporate Governance Attestation subject with the following amendments.
	Action(s): a) Update the Corporate Governance Attestation with: Strategic Plan launch date. Completion date of Aboriginal Cultural Engagement Self-Assessment Tool (ACESAT). Provide the Governing Board with an update on Independent Commission Against Corruption (ICAC) reports during the 2021-22 financial year.
5.5	Internal Audit and Risk Management Attestation
	Resolution(s): The MNCLHD Governing Board endorsed the Internal Audit and Risk Management Attestation.
5.6	Clinical Governance Attestation
	Resolution(s): The MNCLHD Governing Board endorsed the Clinical Governance Attestation.
5.7	MNCLHD Risk Appetite Statement
	The MNCLHD Risk Appetite Statement was discussed in detail.
	Resolution(s): The MNCLHD Governing Board endorsed the MNCLHD Risk Appetite Statement subject to the inclusion of Cyber Security.
	Action(s): a) Include Cyber Security on the MNCLHD Risk Appetite Statement.
5.8	MNCLHD Internal Audit Plan 2022-23
	The MNCLHD Internal Audit Plan 2022-23 was discussed.
	Resolution(s): The MNCLHD Governing Board noted the MNCLHD Internal Audit Plan 2022-23.
	a) Governing Board members to provide feedback to the Governing Board Secretariat.
5.9	MNCLHD Fraud and Corruption Control Plan 2022-23
	The MNCLHD Fraud and Corruption Control Plan 2022-23 was discussed in detail. A Public Interest Disclosure presentation will be provided to the Governing Board at the September Governing Board meeting.
	Resolution(s): The MNCLHD Governing Board noted the MNCLHD Fraud and Corruption Control Plan 2022-23.
5.10	MNCLHD Culture Dashboard
	The Governing Board commended the dashboard. Recruitment strategies were discussed.



 $\textbf{Resolution(s):} \ \textbf{The MNCLHD Governing Board noted the MNCLHD Culture Dashboard presentation}.$

Action(s):

a) Include an annual comparison rate to monitor trending over time.

Item 6. Standing Agenda Items		
6.1	Governing Board Chair's Report – verbal update	
	Nil.	
6.2	Chief Executive's Summary	
	The Chief Executive provided an update on:	
	 Support to Manning Base Hospital and Grafton Base Hospitals 	
	Patient flow and discharge strategies for aged care patients	
	The Governing Board noted the release of the MNCLHD Strategic Plan 2022-2032	
	Resolution(s): The MNCLHD Governing Board accepted the Chief Executive's Summary and attachments.	
	Action(s):	
	a) Update COVID-19 report with new vaccination parameters.	
6.3	MNCLHD Organisational Performance Report – Year to Date Results for June 2022	
	The Governing Board noted the MNCLHD Organisational Performance Report format will be updated to reflect the new performance model.	
	Resolution(s): The Governing Board discussed and accepted the Organisational Performance Report.	
6.4	Board Member Staff Meetings	
	Nil.	
6.5	Enterprise Risk Report (ERM)	
	The Governing Board discussed the report in detail. The Governing Board noted the categorisation of risk levels.	
	Resolution(s): The MNCLHD Governing Board accepted the Enterprise Risk Report (ERM).	
	Action(s):	
	a) Provide the Governing Board with an update on Risk #1002058.	
	b) Provide the Governing Board with a monthly update on the top 10 organisational risks.	
6.6	Anderson Report Recommendations (Staff Safety)	



	Resolution(s): The MNCLHD Governing Board accepted the Anderson Report Recommendations (Staff Safety) update.		
	Action(s): The Governing Board requests timeframes be added to the progress report		
	a) The Governing Board requests timeframes be added to the progress report.		
6.7	Serious Adverse Event Review (SAER) and Coroner Recommendations Report June 2022		
	Resolution(s): The MNCLHD Governing Board accepted the SAER and Coroner Recommendations Report June 2022.		
Item 7	Item 7. Board Submissions – to be taken as read		
7.1	Directorate Summaries		
	7.1.1 Hastings Macleay Clinical Network		
	The Governing Board thanked C. Death for the presentation.		
	Winter Strategies update.		
	Medical Staffing.		
	Manning Base Hospital support.		
	VMP Quinquennium.		
	Resolution(s): The MNCLHD Governing Board accept the Directorate Summary: Hastings Macleay Clinical Network.		
	7.1.2 People and Culture		
	 The Governing Board thanked R. Florence for the submission. Recruitment and retention strategies. 		
	Resolution(s): The MNCLHD Governing Board accepted the Directorate Summary: People and Culture.		
	7.1.3 Internal Audit, Risk and Compliance		
	The Governing Board thanked M. Mearns for the submission.		
	Resolution(s): The MNCLHD Governing Board accepted the Directorate Summary: Internal Audit, Risk and Compliance.		
7.2	Board Sub-Committees		
	7.2.1 Board Sub-Committee: Finance and Performance		
	Resolution(s): The MNCLHD Governing Board accept the Chair's Summary July 2022: Finance and		
	Performance Update June 2022; and Endorsed Minutes June 2022.		
	7.2.2 Board Sub-Committee: Health Care Quality		
	The Governing Board discussed recruitment and staffing including the centralising of recruitment.		
	Resolution(s): The MNCLHD Governing Board accept the Chair's Summary June 2022; and Endorsed		



Minutes June 2022.	
7.2.3 Board Sub-Committee: Board Sub-Committee: Medical Dental	Appointments Advisory
The Governing Board discussed the progress of the Ear, Nose and Th Macquarie Base Hospital.	nroat Specialist appointment at Port
Resolution(s): The MNCLHD Governing Board accept the Chair's Sum June 2022; and Appointment of Visiting Practitioners June 2022.	nmary June 2022; Endorsed Minutes
7.2.4 Board Sub-Committee: Partnering with Consumers	
Resolution(s): The MNCLHD Governing Board accept the Chair's Sum May 2022.	nmary July 2022; and Endorsed Minutes
7.2.5 Board Sub-Committee: Integrating Care	
The Sub-Committee Chair advised the Sub-Committee has paused w completed.	hile a Program Logic review is
Resolution(s): The MNCLHD Governing Board noted the chair's verb	al update.
Action(s): a) Provide the Governing Board with an update on the Sub-Commit	ttee Program Logic review.
Item 8. Annual Planner	
8.1 Resolution(s): The MNCLHD Governing Board noted the Annual Plan	nner.
Item 9. General Business without notice and Correspondence (to be taken as	s read)
Correspondence to the Governing Board	
9.1 Resolution(s): The MNCLHD Governing Board noted the correspondent	ence.
Correspondence to the Governing Board Chair	
Resolution(s): The MNCLHD Governing Board noted the correspondence	ence.
9.2 Action(s): a) Provide the Governing Board with an update.	
Safety Focus Session	
The Governing Board requested a focus session on Safety and responses.	nsibilities.
Action(s): a) Governing Board to complete a Safety focus session.	
Item 10. Governing Board Reflections	



10.1	The Governing Board Reflections were noted.	
Item 11. Next Meeting		
11.1	14 September Kempsey District Hospital	
Item 12. Close		
12.1	The meeting closed at 2.52 pm.	



MID NORTH COAST LOCAL HEALTH DISTRICT GOVERNING BOARD MEMBERSHIP

Chair

Deputy Chair

Professor Heather Cavanagh

Mr Luke Hartsuyker

Dr Jennifer Beange Michael Coulter

Dr Tim Francis

Gary Humphreys

Susan McGinn OAM

Neil Porter

Dr Alison Seccull

Tracy Singleton

Jennifer Zirkler

Secretariat

Brooke White

Right of Audience and Debate

Stewart Dowrick Chief Executive

Delwyn Kruk Corporate Governance Manager

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?