

MEETING MINUTES - ENDORSED

DATE: Wednesday, 9 August 2017

TIME: Commencing 3.00pm

VENUE: Port Macquarie Community Health Campus – Large VCN Room (CHHC – ED020)

ITEM / DESCRIPTION	ACTION	CARRIAGE	ATT
Attendance and Declarations			
<u>Welcome:</u> Warren Grimshaw AM, Chair.			
Present: Warren Grimshaw Chair (WG), Neil Porter (NPorter), Jo Sutherland (JS), David Kennedy (DK), Neville Parsons (NParsons), Janine Reed (JR), John Barrett (JBarrett), Stephen Begbie (SB), Neil Wendt (NW), Jennifer Beange (JBeange), Gail Whiteford (GW) Apologies: Nil			
In Attendance: John Roberts, Stewart Dowrick (SD), Vanessa Edwards (VE), Lynn Lelean (LL), Julie Usher - Minutes			
Declaration of Pecuniary Interest, Conflict of Interest and Related Transactions.			
Item 1: Presentations			
Presentations/Discussions			
1.1	<p>Patient Story – Close the Gap Presenter: Robyn Martin</p> <p>Robyn Martin presented an overview of the Bathu-Marrung Aboriginal Hydrotherapy Program at the Port Macquarie Base Hospital including:</p> <ul style="list-style-type: none"> The Bathu-Marrung Aboriginal Hydrotherapy Program was initiated to increase the use of the Hydrotherapy services at PMBH by Aboriginal persons. The initial program ran for eight weeks and saw a 314% increase of Aboriginal persons using the Hydrotherapy services compared to the previous 12 months. This engagement was enabled by introducing a timeslot into the Hydrotherapy service timetable, specifically for Aboriginal people. The program was supported by Werin Aboriginal Medical Service, PHN and teams within the MNCLHD. Positive feedback has been received from participants and partners and the program will continue to run. <p>Strategic Direction Update – Close the Gap (CTG) Presenter: Robyn Martin</p> <ul style="list-style-type: none"> The CTG program is progressing well. The CTG Annual Report will be presented to the Board late 2017. The 2016/2017 strategic target for employing 5% Aboriginal persons is still progressing across the District. Some Directorates have achieved this target and others are still working towards this. The first cohort of the Elsa Dixon Program has been completed with high success rates. A large percentage have gone into Allied Health and Medicine and others have joined the LHD casual pool. The outcomes have been either employment or education including University. The second cohort have now commenced, with placements occurring within communities in which the students 	Chair	

ITEM / DESCRIPTION	ACTION	CARRIAGE	ATT
<p>come from. The program will maintain a rolling intake of 10 students with at least one from Bowraville. A longitudinal study of the students over a set period of time may be undertaken in the future.</p> <ul style="list-style-type: none"> The Inaugural Aboriginal Health in Careers Expo was held in Kempsey, with approximately 130 students from across the District in attendance, as well as some Elders who accompanied the students. It was a fantastic day enjoyed by all, and the feedback received was very positive. The Expo also made the National Aboriginal News on Health Careers focus. Evaluation is now occurring to consider if the Expo can be an annual event. Stage One of the Cultural Safety and Security Framework is expected to be completed by December. The CTG Summit and Intensification Framework won the Inaugural Close the Gap Health Innovation Award for 2017. The MoH have convened an Aboriginal Health Strategic Leadership Committee (AHS LC) of which Robyn will participate in. This will lead to opportunities to raise CTG profile. CTG Innovation Fund continues to support various projects across the District. DK suggested monitoring the lead time of when funds are available, and have a list of projects already identified that funds can be allocated to quickly. Robyn will implement a process to identify, implement and keep track of funding and projects in a timely manner. The gap between Aboriginal and non-Aboriginal people in the MNCLHD is closing for the following indicators: <ul style="list-style-type: none"> Unplanned hospital readmissions Breast screen participation rates Children fully immunised at 1 year Children fully immunised at 5 years It was noted that funding for sexual health and Hepatitis C treatment services (employees) had been withdrawn. <p>ACTION: Neil Porter to speak to the Hon David Gillespie MP and The Hon Luke Hartsuyker MP to seek funding to meet the shortfall in the recruitment of sexual health and Hepatitis C treatment services.</p> <ul style="list-style-type: none"> WG noted the interest of other Districts in our CTG programs. Challenges were noted in balancing the recruitment of male/female ratios of Aboriginal Liaison Officers across the District. SD acknowledged the good work undertaken by Robyn Martin and David Kennedy in implementing the numerous CTG strategies, and thanked the CTG Committee for all that has been achieved over the past three years. There is still a long way to go but we should be proud of what has been achieved so far. 			
<p>1.2 Update – Status of Budget for 2016/2017, including Transition Grant By: Stewart Dowrick</p> <ul style="list-style-type: none"> The Finance Committee will investigate why we received late notification of some adjustments. The Board's concerns, expressed in the Special Budget Committee held 27 July 2017, were echoed and the need for tighter controls especially around EFTU was noted. SD confirmed that he was working toward much tighter controls for 2017/18 including a reduction in EFTU, particularly at Coffs Harbour. 	Noted	CE	

ITEM / DESCRIPTION		ACTION	CARRIAGE	ATT
<p>Resolution: The Governing Board received and noted the information provided in Item 1. including the progress on items and actions arising.</p>				
<p>Item 2: Minutes of Governing Board</p>				
2.1	<p>Minutes of Meeting 12 July 2017</p> <ul style="list-style-type: none"> An adjustment to the Minutes in Item 1.1 to be made as follows: <ul style="list-style-type: none"> A&RC identified nine items; of these, two are completed (one in policy and one is on track for completion by June), four are deemed "at risk" with timely capitalisation of assets due to Health Infrastructure, and three involve excess annual leave, salary overpayments and unapproved timesheets and action by the District is monitored. 	Endorsed	Chair	
<p>Resolution: The Minutes of the Governing Board meeting of 12 July 2017 were confirmed as an accurate record and will be made publicly available on the MNCLHD website.</p>				
<p>Item 3: Business Arising</p>				
<p>Action Table and follow up</p>				
3.1.1	Action Table	Noted	Chair	
3.1.2	<p>Brief: Hospital in the Home (HITH) Further information regarding the Hospital in the Home (HITH) Program that identifies the effectiveness and delivery of services.</p> <p>ACTION: SD to provide the Board with the HITH protocols around how patients are targeted for this program.</p> <ul style="list-style-type: none"> The Board noted the HITH papers and acknowledged the challenges which involve ourselves and the PHN. The Board noted the positive aspects of this program and the need to look to the future in formulating appropriate strategies to further enhance patient care in the home. 	Noted	JE/TB	
3.1.3	<p>Peak Activity Planning Board received a Briefing note detailing the strategies and processes identified and implemented to manage peak activity related to, and associated with, patient flow. This included timely access to care and also the status of 7-day discharge service support from 16/17.</p> <ul style="list-style-type: none"> The patient journey, as always, is a strong focus for our Peak Activity Planning. Winter forms part of the organisations planning and implementation of strategies that have worked over previous years and target specific identified vulnerabilities. In order to enhance 7 Day Discharge operations, this winter we will continue the strategies. <p>In regards to the effectiveness of winter strategies for the 2017 winter period, the following performance highlights were noted across the District:</p> <ul style="list-style-type: none"> MNCLHD has already experienced an increase in activity The District receives a daily snapshot of performance for Emergency Treatment Performance (ETP) and Transfer of Care (TOC) and notes performance is equal to or above the previous year. <p>ACTION: The Board noted the work being done to maintain performance in this area and extended their thanks to staff. A thank</p>	Noted	VE	

ITEM / DESCRIPTION	ACTION	CARRIAGE	ATT
<p>you letter from the Chair, on behalf of the Board to be included in the next edition of the Pulse.</p> <p>ACTION: Discharge – seek further advice from GMs as to what strategies were most effective and which should be ceased.</p> <p>ACTION: Refer to Integrated Care Committee in regards to improving liaison with PHN</p> <p>ACTION: Board to dedicate time to review areas of concerns such as dealings with PHN and GPs.</p>			
<p>3.1.6 2017 Accreditation Board resolved to extend their thanks to staff on the result of the 2017 Accreditation. Chair - letter to all staff was included in The Pulse.</p>	Noted	WG	
<p>3.1.7 Joint Clinical Meeting MSC Kempsey/Port</p> <ul style="list-style-type: none"> Board resolved to commend those involved in the joint clinical meeting with MSC representatives from Kempsey District Hospital and Port Macquarie Base Hospital, working through the issues and presenting agreement on this matter. The outcomes as presented were endorsed by the Board. 	Noted	SD	
<p>3.1.8 NSW Health</p> <ul style="list-style-type: none"> Board resolved that the CE write to NSW Health providing information on the Board's concerns as below: <ul style="list-style-type: none"> We note the late notification (end of June) in terms of the adjustments to budget (accrual of annual Leave) and ask the CE to seek supplementation for that amount. Seek explanations in respect of income for AARP or HI not being received and resolve that we be provided with an appropriate explanation and supplementary funding to offset that amount. Request CE raise concerns with relevant manager's in regards of surgery and the budget concerns at Coffs Harbour. 	Noted	SD	
<p>Resolution: The Governing Board noted the update on Action items. Items finalised with no further actions will be removed from the Action Table.</p>			
<p>Item 4: Chief Executive's Report</p>			
<p>4.1 Chief Executive's Report and Attachments:</p> <p>Stewart Dowrick gave an update to the Board on the following key issues:</p> <ul style="list-style-type: none"> Performance Management progress across the District has been pleasing with staff engaging in the process and completing their plans for the coming year. <p>ACTION: SD to present to the Board at the October meeting, the PWC proposed structure and options, noting the capacity to fund any changes as a consideration.</p> <ul style="list-style-type: none"> Recruitment is underway for the role of Executive Director – Financial Operations following the resignation of Nick De Groot 	Noted	CE	

ITEM / DESCRIPTION	ACTION	CARRIAGE	ATT
<p>from NSW Health. Stephen Mitchell and Kate Vandoros will act in the role until a permanent replacement is appointed.</p> <ul style="list-style-type: none"> The People Matters Survey for 2017 has concluded with 52% of District staff completing the survey. The results will be presented to the Board. Bronwyn Chalker and Stephen Rodwell both graduated from the NSW Senior Leadership Development Pilot Program. The Mental Health Strengthening Plan continues steadily with a new structure now in place. The District maintains its performance rating. The District has achieved surgical targets this month. Work continues on the improvement of the application of the 'Time Out' policy across the district. Recruitment for four Physicians in Kempsey (one is an annual leave replacement), is underway. The Board noted concerns around Macksville maternity services. <p>Action: SD to report on Macksville maternity options at the September Board Meeting.</p> <ul style="list-style-type: none"> The National Research and Innovation Symposium organised by MNCLHD was successful. Feedback from attendees, presenters and staff has been positive. A review will be undertaken to evaluate the first two years of this Symposium and determine any future events. <p>Action: SD to report on the costings and options for future events in the research space.</p> <ul style="list-style-type: none"> Issues around the FTE will be presented to the Finance and Performance Committee. The MoH will undertake a review of District practices as they relate to the seclusion, restraint and observation of consumers with a mental illness during August and September 2017. Work is continuing at CHHC to free up additional space for clinical use. 			
4.2	Chief Executive's Key Performance Indicators.	Noted	CE
<p>Resolution: The Governing Board received and noted the information provided in Item 4 and noted the 2016/17 Reflections and where we are heading, including some of the challenges.</p>			
<p>Item 5: Strategic Matters (as per the MNCLHD Strategic Directions 2017-2021) - for discussion and/or endorsement</p>			
<p>5.1 People, Patients and the Community</p>			
<p>We deliver patient-centred care informed by patients, their families and the community</p>			
5.1.1	<p>Board Sub-Committee: Community Engagement</p> <ul style="list-style-type: none"> Minutes – Confirmed Minutes – 29th May 2017 Chair Summary – Meeting held 31 July Community Reference Group – HMCN – Endorsed Minutes 28/2/17 Community Reference Group – CCN – Endorsed Minutes 2/3/17 Feedback from the Patient Experience Symposium (x 3) 	Noted	Chair CESC

ITEM / DESCRIPTION	ACTION	CARRIAGE	ATT
ACTION: Discussion occurred around the provision of services to the refugee community in Coffs Harbour. A background Brief to be provided to the Board for information prior to any resolution.			
Resolution/s confirmed by the Board relating to Item 5.1:			
1. The Governing Board received and noted the information provided in Item 5.1.			
5.2 Leadership, Workforce and Culture			
We support the development of our workforce through learning and development, with a culture that supports everyone to be their best			
5.2.1	Board Sub-Committee: Workforce, Health & Safety <ul style="list-style-type: none"> The next meeting is being held on 21 August 2017. (The meetings are now held bi-monthly (last meeting 19 June 2017)). 	Noted	Chair WHS
5.2.2	Board Sub-Committee: MDAAC <ul style="list-style-type: none"> Minutes – Confirmed Minutes 8 June 2017 Chair Summary - Meeting 13 July 2017 	Noted	Chair MDAAC
Resolution/s confirmed by the Board relating to Item 5.2:			
1. The Governing Board received and noted the information provided in Item 5.2			
5.3 Integrated Care			
We have strong partnerships with healthcare providers across the Mid North Coast to ensure we can deliver truly integrated healthcare			
5.3.1	Board Sub-Committee: Integrated Care <ul style="list-style-type: none"> Minutes – Confirmed Minutes 13 March 2017 Chair Summary - Meeting 13 July 2017 	Noted	
Resolution/s confirmed by the Board relating to Item 5.3:			
1. The Governing Board received and noted the information provided in Item 5.3			
5.4 Safety and Quality			
The safety of our staff, patients and the community is at the core of everything we do. We use data, research and evidence to inform the delivery of quality care.			
5.4.1	Board Sub-Committee: Health Care Quality <ul style="list-style-type: none"> Minutes – Confirmed Minutes Meeting 26 June 2017 Chair Summary – 31 July 2017 	Noted	Chair HCQC
Resolution/s confirmed by the Board relating to Item 5.4:			
1. The Governing Board received and noted the information provided in Item 5.4.			
5.5 Innovation and Research			
We evaluate our outcomes against best practice. We collaborate with academic partners to ensure research is part of our culture			
5.5.1	Board Sub-Committee: Health Service Development & Innovation <ul style="list-style-type: none"> It was noted that the next meeting is being held on 9 August 2017 	Noted	
Resolution/s confirmed by the Board relating to Item 5.5:			
1. The Governing Board received and noted the information provided in Item 5.5			
5.6 Value and Accountability			
We drive value by delivering the best patient outcomes within a level of expenditure that is sustainable			
5.6.1	Board Sub-Committee: Finance and Performance <ul style="list-style-type: none"> Minutes – Confirmed Minutes Meeting 27 June 2017 Chair Summary – Meeting 25 July 2017 	Noted	Chair F&P
Identification of Risks for Item 5.6 (if applicable):			
<ul style="list-style-type: none"> The Board requested further information on the NWAU Target. 			

ITEM / DESCRIPTION		ACTION	CARRIAGE	ATT
Resolution/s confirmed by the Board relating to Item 5.6:				
1. The Governing Board received and note the information provided, and roundtable discussion in Item 5.6.				
5.7 Closing the Gap				
We will continue to work towards closing the gap of health disparities between Aboriginal and non-Aboriginal people				
5.7.1	Board Sub-Committee: Close the Gap <ul style="list-style-type: none"> It was noted that the next meeting is being held on 21 August 2017 	Noted	Chair CTG	
Resolution/s confirmed by the Board relating to Item 5.7:				
1. The Governing Board received and noted the information provided in Item 5.7.				
Item 6: Other Operational Items for Discussion				
6.1	Advice from Secretary Elizabeth Koff regarding S17/364 – Winter Demand Management	Noted	Chair	
Item 7: Directorate Updates				
Directorate Updates				
7.1	Mental Health & Integrated Care	Noted		
7.2	Public Health	Noted		
7.3	Aboriginal Health & Primary Partnerships	Noted		
7.4	Nursing, Midwifery & Workforce	Noted		
7.5	Clinical Governance & Information Services	Noted		
7.6	Financial Operations and Asset Management	Noted		
7.7	Communications & Strategic Relations	Noted		
7.8	Coffs Clinical Network Report	Noted		
7.9	Hastings Macleay Clinical Network Report	Noted		
Resolution: The Governing Board received and noted the information provided in Item 7.				
Item 8: For Information of the Board (Discussion by exception)				
Correspondence, General Business & Questions on Notice				
8.1	Confidentiality (Standing item)	Noted	Chair	
8.2	Letter from Secretary Elizabeth Koff, regarding ED attendance data and discharge processes.	Noted.	Chair	
8.3	The Board extended their congratulations to the MNCLHD Integrated Multi Media Unit for the successful launch of the 2017 'Your Health Link National Photographic Competition'.	Noted	Chair	
Resolution: The Governing Board received and noted the information provided in Item 8.				
Item 9: 2017 - Upcoming visits and events (for information)				
Date	Event Details			
3-4 August	Rural Innovation and Research Symposium (Coffs Harbour)			
23 August	Senior Executive meet with Volunteers (SWR)			
4 September	Council of Board Chairs Forum			
13 September	MNCLHD Board Meeting - CHHC			
6 October	Senior Manager Forum (Slim Dusty Centre)			
11 October	MNCLHD Board Meeting – (TBA - Wauchope)			
16 October	ACHSM MNC Health Leaders Forum (Coffs Harbour)			



ITEM / DESCRIPTION		ACTION	CARRIAGE	ATT
8 November	MNCLHD Board Meeting - CHHC			
16 November	National Obesity Summit (Glasshouse Port Macquarie)			
17 November	Your Health Link National Photographic Competition (Glasshouse Port Macquarie)			
13 December	MNCLHD Board Meeting – PMCHC Annual Public Meeting - TBA			
There being no further business the meeting closed at 6.30pm.				