

1.00pm – 1.30pm Ms Rosie Kew, Board Member presented on lessons learned from Harvard Strategic Analysis tool

Ms Kew spoke about how she had undertaken the Harvard University Course and that this identified the importance of identifying the Vision and Mission of the organisation and for all Staff to understand what these are. Ms Kew indicated that Branding is a key component when developing a Vision/Mission Statement and it involves having partnerships such as those with the North Coast Primary Health Network (NCPHN) and Family and Community Services and that Northern NSW Local Health District (NNSW LHD) may need to look closely at its current Purpose Statement to better define what it is the LHD does so that it encapsulates its core business and partnerships and that it fits with other Agencies Branding.

Ms Kew referred to the information that had been circulated in the Meeting Agenda Papers on branding which indicated that when an organisation is in a transition phase of recruiting a new Chief Executive, is a good time to review its Purpose/Mission.

Ms Kew suggested that a challenge for NNSW LHD may be embracing social media in a more robust way as Branding is a tool that allows people to make decisions on what services they will access or may require. Ms Kew noted that the LHD does have a Facebook site which covers Health Promotion and recruitment matters. Ms Kew suggested that there could be identified Brand Ambassadors throughout the whole organisation or that everyone should be a brand ambassador.

The Board discussed the potential benefits and deficits of using some social media sites and how hard it can be to manage and suggested that it the LHD needs to identify what the specific social media are to be used for and the audience that the LHD wants to target.

Dr Page indicated that Clinicians are bound by rules and regulations of advertising and the Australian Health Practitioners Regulation Agency (APRHA) regulations and in Australia the AHPRA position is that Clinicians should not utilise social media for advertising. Dr Page referred to the social media systems that are currently utilised by the Mayo Clinic and advised that she would email the Board Members a newsletter from the Mayo Clinic that provides information on its social media sites.

Following a lengthy discussion the Board proposed that the current NNSW LHD Strategic Plan Values and Purpose Statement is reviewed to see if the Purpose Statement is still current. The Board suggested that this should form part of a facilitated NNSW LHD Board Workshop to be held prior to the 29 June 2016 Board Meeting commencing at 8.00am to review the current NNSW LHD Strategic Plan Purpose Statement and whether it potential to develop branding for the LHD. The Board asked that the Executive are invited to the Board Workshop.

Ms Crayden advised that she would provide a list of proposed Facilitators to Ms Symes for consideration.

Action:

Ms Annette Symes, Acting Chief Executive is provide a Brief to the 2 March 2016 Board Meeting advising of proposed arrangements and costing for a Facilitator to conduct a workshop for the NNSW LHD Board to review the current NNSW LHD Strategic Plan Vision and Purpose Statement and the potential to develop branding for the LHD to be held prior to the 29 June 2016 Board Meeting commencing at 8.00am in Lismore.

1. PRESENT AND APOLOGIES:

Dr Brian Pezzutti (Chair), Mr Malcolm Marshall (Chair), Mr David Frazer, Dr Joe Ogg, Dr Jean Collie, Dr Sue Page, Dr Allan Tyson, Ms Deb Monaghan, Ms Leonie Crayden, Mr Mark Humphries and Ms Rosie Kew.

Via Videoconference: Dr John Moran

In Attendance : Ms Annette Symes (Acting Chief Executive), Mr Murray Spriggs, Ms Jenny Cleaver (Secretariat)

1. Apologies: Professor Lesley Barclay

3. Declaration of Pecuniary and/or Conflicts of Interest

There were no declarations of Pecuniary and/or Conflicts of Interest by Board Members.

The Chair paid his respects to Aboriginal Elders, past and present, as the traditional owners of the land, being the Bundjalung Nation and thanked them for their custodianship of the land.

4. Board Members to asterisk non-asterisked items that they wish to discuss.

The Board Members asterisked Agenda Items 6.2, 6.3, 6.4, 6.5, 6.7, 6.8, 6.9, 6.10 and 6.12.

***5. Previous Minutes:**

a) The Minutes of the Board Meeting held on 2 December 2015 as circulated were ENDORSED as a true and accurate record of the meeting with the following amendments:

Page 1 Fourth paragraph to now read "...which were flagging in the first report as an outlier with higher mortality than expected."

Page 7 Item 6.8 to now read "The Board Chair thanked..... And the Board Chair's letter of response to the NSW Ministry of Health for the 2015/16 Service Agreement negotiations."

"The Board Chair provided verbal feedback to discuss the 2015/16 Service Agreement and the negotiation of the 2016/17 Service Agreement"

Page14 Second paragraph to now read "...NNSW LHD not taking action to address its compliance issues..."

Page 18 Item 13.2 to now read "Memorandum of Understanding between NSW LHD and North Coast Primary Health Network."

Moved: Mr Mark Humphries
Seconded: Dr Jean Collie
CARRIED

b) Minutes of the 2 December 2015 Community and Stakeholder Meeting were endorsed as a true and accurate record of the Meeting.

Moved: Mr Mark Humphries
Seconded: Dr Jean Collie
CARRIED

Business Arising from the Minutes:

6.1 The Acting Chief Executive is to provide further information on how the high cost of electricity usage at the Yamba Community Health Centre (YCHC) is to be remediated to the 3 February 2016 Board Meeting for noting.

The Board noted the information provided in the Brief from Lynne Weir, Executive Director Richmond Clarence Health Service Group on the steps taken to reduce energy consumption at the YCHC.

***6.2 The Acting Chief Executive is to provide a Report to the 3 February 2016 Board Meeting on the work undertaken by the NSW LHD Executive concerning the establishment of a Working Party to progress work required to maintain LHD Simulation Training Facilities at identified LHD Sites.**

Dr Ogg spoke on the need to quarantine the funding from the Bond and Griffith Universities to support The Tweed Hospital (TTH) Simulation Centre and that this funding should not be included in General Revenue.

Dr Ogg reported that he has commenced the process to employ Staff to commence Simulation training at TTH. Dr Ogg also noted the proposal that is being considered as part of the work being undertaken for TTH Staff to undertake Simulation Training at the MDH Simulation Centre however he suggested that this model does not fit the best practice model evidence.

Dr Ogg also indicated that Simulation Training needs to have a holistic multidisciplinary approach and should be included in the NSW LHD Education and Training Strategic Plan that is to be developed in the near future.

The Board moved a motion that following the information from the previous Chief Executive that funds were available to support Simulation Training at TTH and that they had been utilised elsewhere, these funds need to be identified and quarantined for the purpose for which they have been provided.

Moved: Dr Allan Tyson
Seconded: Dr Joe Ogg

The Board requested that Grafton Base Hospital is included in the work being undertaken by the Working Party on Simulation Centres.

A Report is to be provided to the April 2016 Board Meeting on what progress has been made by the Simulation Centre Working Party.

An update is also to be provided by the Working Party of Mr Wayne Jones, Ms Bernadette Loughnane, Dr Joe Ogg and Ms Sharene Pascoe to the 3 February 2016 Board Meeting on the progress they have made towards developing a specific proposal for the provision of Simulation Centre Services for The Tweed Hospital Clinicians and Students.

The Board noted the Brief from Wayne Jones, Chief of Staff, Chief Executive Unit, which was provided in the Meeting Agenda Papers on establishing the working group to review the use of the Simulation Units located across the LHD.

***6.3 The Board is to receive a first draft of the NSW LHD Education and Training Strategic Plan at its May 2016 Board Meeting with a final draft for endorsement to be submitted to the June 2016 Board Meeting.**

The Board noted that a holistic multidisciplinary approach needs to be included in the NSW LHD Education and Training Strategic Plan, including simulation training. The Board also indicated that wide consultation needs to occur in the development of the NSW LHD Education and Training Plan.

The Board requested that a Draft Terms of Reference for the NSW LHD Education and Training Strategic Plan is provided to the 2 March 2016 Board Meeting for consideration.

Ms Symes also advised Ms Annette Solmon, Chief Executive, Health Education and Training Institute has offered to visit NSW LHD to discuss education and training. The Board suggested that a Board Working Party including Senior LHD Staff and other representatives meet with Ms Solmon to discuss strategic education and training issues for NSW LHD and provide feedback to the Board meeting in due course.

The Board Members nominated for the Working Party to meet Ms Solmon were Dr Sue Page, Dr Jean Collie, Dr Joe Ogg, Dr John Moran, Director of Northern Rivers University Centre for Rural Health, Ms Janne Boot, Manager Workforce Change and Sustainability, Ms Rae Rafferty, NSW LHD Nursing and Midwifery representative, Ms Victoria Le Quesne, TAFE representative, representative from NCPHN, representative from Southern Cross University and an appropriate community representative.

Mr Marshall advised that he will discuss potential funding for allocation of resources for education and training with Mr James McGuigan, Executive Director of Finance to support the NSW LHD Education and Training Strategic Plan.

Action:

Ms Annette Symes, Acting Chief Executive is to request Mr Wayne Jones, Chief of Staff, Chief Executive Unit to provide a Draft Terms of Reference for the NSW LHD Education and Training Strategic Plan is provided to the 2 March 2016 Board Meeting for consideration.

Ms Annette Symes, Acting Chief Executive is to arrange a visit by Ms Annette Solmon, Chief Executive, Health Education and Training Institute to meet with the Board Working Party to discuss NSW LHD Education and Training.

Ms Kew is to provide an outline of the Harvard University Course she had attended in relation to Value, Support and Capacity which are to be captured in the NSW LHD Education and Training Strategic Plan.

Refer to discussion held prior to the Board Meeting.

- *6.4 The Chief Executive is to forward a letter to the Editor of the Grafton Examiner at an appropriate time emphasising that NSW LHD is concerned about the recent suicides that have occurred in the Clarence Valley and expressing the LHD's sympathy to the families involved and also providing advice about the services that are available in the Clarence Valley for people suffering Mental Illness.**

The Board were advised that Ms Moira Waters, Planning Officer, is about to undertake consultation on the NSW LHD Mental Health Strategic Plan, with the first consultation occurring in the Clarence Valley. The Board suggested that a less wordy Media Release is released closer to that consultation occurring in the Clarence Valley advising of the consultation to inform the community on what the consultation is to cover and why it is important to commence in the Clarence Valley.

The Board requested that a reworded draft Media Release advising of the consultation is approved by the Board Chair prior to the Release being circulated.

Action:

Ms Annette Symes, Acting Chief Executive, is to arrange for a reworded draft Media Release to be prepared in conjunction with Dr Richard Buss, Executive Director Mental Health and Drug and Alcohol Service advising of the commencement of consultation on the draft NSW LHD Mental Health Strategic Plan in the Clarence Valley. The Media Release is to be approved by the Board Chair prior to being circulated.

- *6.5 Mr Crawford is to request Ms Ellie Saberi, Women's Health and Domestic Violence Co-ordinator to prepare appropriate wording of a pledge which the Board can make to support a reduction of Domestic/Family Violence across the LHD and this is to be circulated as a Media Statement with a photo of the Board undertaking this pledge. The draft wording of the pledge is to be submitted to the 3 February 2016 Board Meeting for consideration.**

The Board requested that the pledge include amended wording on the second dot point of the pledge for individual members of the NSW LHD Board to read:

“Increase my knowledge about services that are available to support anyone affected by domestic and family violence”

The Board requested that the NNSW LHD Media Manager photograph Dr John Moran and the Board Chair undertaking the pledge and advising that all NNSW LHD Board Members have taken this pledge and place on the NNSW LHD Social Media site.

The Board approved the purchase of ten Banners with the amending wording on the Banners to read “The Health Service says no to domestic and family violence”

Mr Murray Spriggs is to arrange for the Board to receive education on Family and Domestic Violence prior to a 2016 Board Meeting.

Action:

Mr Murray Spriggs is to arrange for the Board to receive education on Family and Domestic Violence prior to a 2016 Board Meeting.

The Board Chair write to Mr Kevin Hogan, MP, Member for Richmond suggesting that there is a need for a joint planning exercise across the local community to identify new and better strategies to address Domestic/Family Violence.

The Board noted the letter to Kevin Hogan, MP Member for Page dated 11 December 2015 from the Board Chair concerning the need for a joint planning exercise across the local community to identify new and better strategies to address Domestic/Family Violence.

6.6 The Board Chair is to correspond with Ms Lynne Weir, Executive Director Richmond Clarence Health Service Group, congratulating her on the success of the LBH Fete for the funds raised and the impact on providing good community ties.

The Board noted the letter to Ms Lynne Weir, Executive Director Richmond Clarence Health Service Group dated 11 December 2015 congratulating her on the success of the LBH Fete for the funds raised and the impact on providing good community ties.

***6.7 Information on the number of Mental Health Nurses at the Lismore Adult Mental Health Inpatient Unit (AMHIU) compared to the number at the Tweed AMHIU as indicated on page 306 of the attachments to the Chief Executive’s Report is to be provided to the 3 February 2016 Board Meeting for consideration.**

Ms Symes advised that the information provided in the Brief on the number of Mental Health Nurses are employed NNSW LHD Mental Health facilities including Community Mental Health Services.

The Board noted the information provided in the Brief.

***6.8 Whole of Health Slides – “Implications for Boards and CEs” and “Questions for the Board” are to be resubmitted to the 3 February 2016 Board Meeting for discussion.**

The Board Chair advised that the questions provided on the presentation slides in the Meeting Agenda Papers were from the Board Chairs Meeting.

In relation to transformational change the Board noted that recruitment was an issue where the Board has not been better informed on why recruitment has not been managed differently in the past.

Mr Marshall noted the work being undertaken to develop a Staff Profile which will enable the Managers to manage within the agreed profile.

Mr Marshall also noted the need to be better informed about the challenges and risks that are of concern to the LHD especially going forward with the new developments that are coming on line in the near future and how the LHD will manage recurrent funding that is required to operate these new facilities.

The Chair referred to the LBH Stage 3A Redevelopment and that the north tower block is not being built as intended as the Intensive Care Unit is not moving to a new location. The Chair advised that he has requested a Brief from Mr Troy Harvey, Project Director, Health Infrastructure on the costings to complete the north tower.

The Board raised concern of this major change to the LBH Redevelopment and that it had not been informed of this change earlier.

The Board Chair advised that he will meet with the Minister for Health to discuss additional funding that will be required to complete the LBH Redevelopment.

The Board also suggested that the organisation culture transformational change entails working in partnership with other key stakeholders. The Board noted that Integrated Care, moving to electronic records and work being undertaken in Mental Health to being a community based service are also part of transformational change for the LHD and Board.

***6.9 The Clinician Engagement Working Party is to discuss Between The Flags (BTF) compliance at its next Meeting and is to provide a Report on its deliberations to the next Meeting of the Health Care Quality Committee.**

Ms Symes reported that Ms Pam Mitchell, Clinical Quality Manager is presenting a Brief to the February 2016 Health Care Quality Committee (HCQC) on the discussion that was undertaken at the Clinician Engagement Working Party Meeting in relation to BTF compliance audit results.

Dr Hutton is to draft a letter for the Board Chair's signature to all Admitting Medical Officers setting out the importance of complying with Between the Flags criteria.

The Chair tabled a draft letter that is to be forwarded to the Attending Medical Officers on the results of the LHD poor compliance rates for Rapid Responses.

***6.10 Mr Murray Spriggs is to provide advice to the 3 February 2015 Board Meeting on whether the new Director of the Northern Rivers University Centre of Rural Health can be appointed as a Member of the Medical and Dental Appointments Committee.**

The Board agreed that following the appointment of the new NRUCRH Director, consideration of whether that person can be appointed to the NSW LHD Medical and Dental Appointments Committee (MDAAC) in line with the MDAAC Terms of Reference, will be discussed at MDAAC.

- 6.11 The issue of a phone outage at GBH during a power failure in Lismore was raised and there needs to be consideration of how to alleviate this type of incident occurring again. Mr Crawford advised that he will seek advice from Mr Matt Long, Chief Information Manager about this matter and the Acting or new Chief Executive will provide it to the 3 February 2016 Board Meeting.**

The Board ENDORSED the Recommendations in the Brief from Matt Long, Chief Information Office and Tony Beashel, Acting Chief of Staff, Chief Executive Unit, concerning the outage of the telephone system that occurred at GBH.

- 6.12 Mr Crawford is to forward the final updated Delegations Manual to the Board via Rotating Minute for approval.**

Dr Tyson referred to the Draft Delegations Manual that had been circulated. Ms Symes reported that following the Rotating Minute the Draft Delegations Manual was endorsed by the Board and is in the process of being implemented across the LHD. The Board noted that the Delegations Manual will be amended as required.

- 6.13 Any other Matters Arising from the Board Minutes**

- Ms Symes reported that in relation to the issue that had been raised by Dr Moran concerning booking public patients onto Elective Surgery Waiting Lists. Ms Symes advised that planning for the additional capacity to provide additional lists for Surgeons to undertake additional Orthopaedic surgery and the Board Chair has undertaken to engage with the MOH to receive additional funds to accommodate additional surgery lists on the basis of ABF.

The Board Chair also reported that he has suggested that consideration of better utilising available operating theatre space in other locations such as Ballina District, Casino District and Murwillumbah District Hospitals to accommodate additional theatre lists. The Chair noted that the Surgeon has to be prepared to undertake the additional lists if the LHD can provide additional operating space.

Dr Ogg also noted that should additional Orthopaedic Surgery be available Allied Health support needs to also be available to support these Orthopaedic patients.

Ms Symes advised that Mr Wayne Jones, Chief of Staff, Chief Executive Unit is now undertaking work to progress this strategy to accommodate additional Surgery.

- The Board Chair raised the issue of the Maclean District Hospital (McLDH) Rehabilitation Unit being able to be opened. The Board Chair reported that he has advised Ms Lynne Weir, Executive Director Richmond Clarence Health Service Group that he wants the McLDH Rehabilitation Unit ready to be opened by July 2016

employing a fulltime Occupational Therapist (OT) if a part-time is not able to be recruited.

The Chair reported that he had been advised by Mr Wayne Jones, Chief of Staff, Chief Executive Unit that the funding for the McLDH Rehabilitation Unit has been allocated but is not received until the Unit is open and the service being provided. The Board noted its concern that it had not been advised of this matter previously.

Ms Symes advised that a Social Worker is employed for the McLDH Rehabilitation Unit who is currently working elsewhere until the Unit is opened, the LHD has advertised for the .5 FTE OT position without success however it is now being readvertised and advice has been received that there is an interested candidate for the position which is being followed up. Ms Symes also noted that work undertaken with Southern Cross University and NCPHN for a shared OT position had not been successful.

- The Board asked that Dr Ian McPhee, previous Chair TTH Heads of Department and advocate for TTH Services is offered to be a guest at a dinner hosted by the Board and Executive to thank him for his long term advocacy for the local health services. The Board also requested that should Dr McPhee not be able to attend a dinner, a letter of thanks from the Board is forwarded to Dr McPhee.

Action:

The Board Secretariat is to contact Dr Ian McPhee, previous Chair TTH Heads of Department and advocate for TTH Services to advise that the NSW LHD Board would like to host a dinner to thank Dr McPhee for his long term advocacy for the local health services

Should Dr McPhee not be able to attend a dinner, a letter of thanks from the Board is forwarded to Dr McPhee.

7. *** Action Table - NSW LHD Board Resolution & Decision Register.**
The Updated NSW LHD Board Resolution and Decision Register from the 2 December 2015 Board Meeting were noted.
 - 7.1 **Changes to Register Items 484, 497, 501 and 502 covered in Item 6 Business Arising.**
Noted
 - 7.2 **New Register items 507 and 514 were covered in Item 6 Business Arising.**
Noted
8. ***Chief Executive's Report**
Ms Symes referred to the issues that were covered in the Chief Executive's Report to the Board, which included the retirement of Chris Crawford, Chief Executive, retirement of Dr Ian Fielding, Executive Medical Director, Reporting mechanism – Executive to Board,

National Disability Insurance Scheme, GBH Obstetrics and Gynaecology Service, MDH Maternity Service, MOH/NNSW LHD 2015/16 Service Agreement, Health on a Page, Community Engagement Conference, Clinician Engagement, Integrated Care, 2015/16 Budget, Elective Surgery and Emergency Patient Results, Capital Work Projects – Lismore Base Hospital (LBH) Stages 3A and 3B, Byron Central Hospital, Planning Projects – Ballina District Hospital (BDH) Operating Suite and Medical Imaging Upgrade, TTH Stage 4A, Bonalbo Multipurpose Service, Coraki HealthOne Service, GBH Ambulatory Care Centre, MDH Satellite Renal Dialysis Unit, Pathology North – Tweed Laboratory Upgrade, Maclean District Hospital Rehabilitation Unit, Research, Mental Health Developments, Dr Taylor, Asset Replacement and Refurbishment Program, Security, Reporting for Better Patient Outcomes and Media Issues.

Ms Symes referred to the Reports from the Executive Directors that were included in the Chief Executive's Report. Ms Symes advised that the Executive had been requested to provide a one page Brief to the Board on any issues of high risk or issues that could be contentious noting that in some months there may be no reports received from some Executive Directors. The Board were supportive of the format for the Executive Reports.

Ms Symes advised that in relation to the LHD Budget there is an issue relating to coding with both TTH and LBH being quite behind in their respective coding and this incorporates Mental Health coding at both sites. Ms Symes advised that being behind in coding has a substantial potential impact on the LHD Budget. Ms Symes indicated that the Executive has a plan in place to address the coding issue and noted that there are some coding vacancies that are impacting on the coding backlog. The strategy to address the backlog includes Coders undertaking overtime or contracting external Coders, which is not the favoured option. Ms Symes advised the Board that it is imperative to complete the backlog in coding to be able to position the Board Chair to negotiate funding for 2016/17.

Ms Symes reported that the LHD has received advice that it has been successful in receiving approval for two of its submissions on the Asset Replacement and Refurbishment Program for TTH and BDH.

Ms Symes advised that security in Hospitals has been raised as a high priority by the Minister for Health and the Minister will be holding a roundtable meeting with relevant Unions and stakeholders on 8 February 2016. It is expected that the roundtable meeting will discuss issues mainly around Emergency Departments.

Ms Symes indicated that some of the local data reported in the media was inaccurate. Auditing will be undertaken in LHDs in relation to compliance and management of Security Policies. Ms Symes also suggested that there will need to be funding resources allocated to resolve the issue of security across the State.

Following a query on the specific role of Security Officers, Ms Symes advised that there is a protocol which allows Security Officers to constrain a Patient if they are a mental health Patient or considered to be drug affected or aggressive. Ms Symes advised that she will circulate the protocol to the Board for its information.

The Board discussed where regular security audits fit into the work that is currently being undertaken with security, the need for appropriate design of spaces when developments are being planned and what is available for Patients who are waiting before being seen in ED waiting areas as well as how reception staff interact with some Patients.

Ms Symes reported that it is expected that there will be some funding made available to assist with the design issues relating to EDs to assist to stem security incidents.

The Board discussed the following matters:

- The Board noted the announcement of a gaol being developed outside of Grafton and indicated that future planning of GBH ED will need to consider the management of inmates requiring care at GBH and to have an identified secure area which may require more staffing.

The Board were advised that presently the current population of the old Grafton gaol is greater than when the gaol was previously opened and this is causing some difficulties for GBH and Justice Health in terms of staffing. The Board requested that this issue needs to be raised with the Secretary, MOH to ensure that there are adequate resources in relation to the new Grafton Gaol.

- Ms Symes advised that following the damage to the LBH Maternity Pod, Ms Lynne Weir, Executive Director Richmond Clarence Health Service Group has personally followed up on the Patients that needed to be moved from the Maternity Pod to ensure that they have been referred to appropriate services as required in addition to Staff being supported by the LBH Management.
- The Chair indicated that Health Infrastructure should be responsible for funding any associated costs to move beds to other facilities, should this occur following the storm damage to the LBH Maternity Pod.

Ms Symes indicated that no Maternity Patients are being transferred however where appropriate women are supported to discharge home if they wish to do so.

- The Board suggested that the recruitment of the Executive Medical Director position following the retirement of Dr Ian Fielding, is progressed as this is such a crucial Executive position.
- The Board requested that it be included in the 360° Clinician engagement survey in relation to the competencies, values and behaviours of Clinician engagement. Ms Symes is to make arrangements for Mr Brian Dolan from 360° Health Service to meet with the Board when he visits the LHD.
- Ambulatory Care Service at GBH funding shortfall due to the proposed services that have been identified to be included in the Ambulatory Care Service is more than the

available funding. Therefore work will need to be undertaken to identify additional funding or relook at the services within the Ambulatory Care Service.

Ms Symes reported that following a request a Brief has been forwarded to Mr Kevin Hogan MP, Member for Page to seek additional funding for GBH Ambulatory Care Service.

- The Board queried the Nursing Hours Per Patient Day (NHPPD) data not being able to be captured and does this mean that there is an inaccurate distribution across the LHD?

Ms Symes responded that NHPPD data cannot be extracted with the new HealthRoster System. The Executive Director of Nursing and Midwifery is meeting with HealthRoster Program representatives to try and develop a system where NHPPD can be extracted easily. Ms Symes advised that she will provide a monthly update to the Board on how this matter is progressing.

- The Board queried NSW Ambulance Service seeking to charge NNSW LHD around \$370K more than it had previously requested the LHD to provide. Ms Symes advised that advice has recently been received that this matter has been resolved with the LHD agreeing to pay only \$85K.

Mr Marshall indicated that an action from the Finance and Performance Committee was to correspond with the Auditor General raising this matter as similar requests have been received from NSW Ambulance Services over the last three or four years.

- The Board requested that at the next LHD and NSW Ambulance Service Meeting the issue of an On-stretcher Key Performance Indicator is to be raised.

The Board ENDORSED the Acting Chief Executive's Report.

Action:

Ms Symes is to circulate the protocol concerning the role of Security Officers to the Board for information.

Ms Symes is to correspond with the Secretary, MOH advising that presently the current population of the old Grafton Gaol is greater than when the Gaol was previously opened and this is causing some difficulties for GBH and Justice Health in terms of staffing. The letter is to also seek advice on what representations the Secretary has made to the Secretary, Justice Health to ensure that there are adequate resources in relation to the new Grafton Gaol.

Ms Symes is to make arrangements for the Board to be included in the 360° Clinician engagement survey in relation to the competencies, values and behaviours of Clinician engagement and to arrange for Mr Brian Dolan from 360° Health Service to meet with the Board when he visits the LHD.

Ms Symes is to provide a report to the 2 March 2016 Board Meeting on work being undertaken to extract Nursing Hours Per Patient Day data from the HealthRoster Program.

***9. Strategic and Planning Items**

9.1 Clarence Valley Health Services Plan for endorsement

The Clarence Valley Health Services Plan is to be heldover pending submission to the Health Services Development Committee for consideration and endorsement.

9.2 Communications at Bonalbo Hospital and Urbenville Multipurpose Service

The Board noted the information contained in the Brief from Matt Long, Chief Information Officer and Tony Beashel, Acting Chief of Staff, Chief Executive Unit advising of the contingency communications options at Bonalbo and Urbenville Multipurpose Service.

Ms Symes reported that as part of the redevelopment at Bonalbo Hospital mobile phone towers are being installed which should assist the mobile communication in that area.

The Board requested that Ms Symes provide further information on the establishment of the mobile phone towers at Bonalbo to the 2 March 2016 Board Meeting.

Action:

Ms Symes is to provide further information on the establishment of the mobile phone towers at Bonalbo to the 2 March 2016 Board Meeting.

9.3 Clinician Engagement Action Plan (for discussion with Drs Sare and Ingall)

The Board Chair referred to the letter of response from Dr Chris Ingall, Chair LBH Medical Staff Council dated 2 February 2016 in response to the invitation from the Board to discuss how the Memorandum of Understanding with the LDH and the seven Recommendations as agreed by the MSEC and the Board would be implemented.

Dr David Sare, Chair Medical Staff Executive Council joined the Board Meeting and advised that Dr Chris Ingall, Chair LBH Medical Staff Council was not able to attend the Board Meeting.

Dr Sare advised that Clinician engagement is fundamental for the Health Service and indicated that the Clinician Engagement Action Plan (CEAP) may be too complex for the average Clinician and suggested that a less complex questionnaire may need to be developed that can capture the Clinician engagement that is being undertaken by Clinicians and LHD Staff.

Ms Symes provided background on the development of the CEWP and how the items listed in the Memorandum of Understanding with the LDH and the seven Recommendations as agreed by the Board Sub-Committee and the MSEC have been

embedded into the CEWP to ensure that these become part of the reporting process for Clinician engagement by Clinicians and Staff so that they become usual business and is reported to the Board and via the Performance Agreements of the Executive Directors and Senior Staff.

Ms Symes also reported that some of the seven Recommendations had already been captured in Recommendations of the CEWP and have been progressed by the Executive Directors.

Dr Sare indicated that a survey had been undertaken across the State on Clinician engagement that may be able to provide a baseline for reporting Clinician engagement. Dr Sare also advised that Tim McCaw, Director of Operations Western Sydney LHD has undertaken work on Clinician engagement and may be able to provide some assistance on developing a simple questionnaire for Clinician engagement for NNSW LHD.

Following discussion the Board suggested that a working party is established with Managers including Medical, Nursing and Allied Health Staff to discuss the development of a simple survey tool with the identification of a benchmark, possibly via the Survey Monkey site, for capturing two way Clinician engagement which could be trialled in a specific LHD facility.

Ms Symes explained the process that will be undertaken with the 360° Survey that is to be undertaken in 2016. The Board requested that representatives of Health Service 360° present to the Board on the work the company will be undertaken to audit Clinician engagement across NNSW LHD. Ms Symes indicated that she will make the necessary arrangements for Health Service 360° representatives to present to a Board Meeting in 2016.

Action:

Ms Symes is to progress the establishment of a working with relevant Managers including Medical, Nursing and Allied Health Staff to discuss the development of a simple survey tool with the identification of a benchmark, possibly via the Survey Monkey site, for capturing two way Clinician engagement which could be trialled in a specific LHD facility.

***10. Minutes – Governance Committees**

10.1 Finance and Performance Committee Meeting (F&PC)

Mr Marshall spoke to the written summary of the key issues discussed at the F&PC Meeting held on 20 January 2016, which were provided in the Board Meeting Papers. Mr Marshall noted concern in the fall in DVA revenue that is at a higher rate than budgeted, and if the MOH supplementations for Annual leave adjustment of \$900K and depreciation adjustment of around \$1.1million are not received then this will impact on the Budget result by around \$2million.

Mr Marshall advised that in relation to the Staff data that he is presenting to the Board it will be working with Mr McGuigan to provide additional information that shows the related activity, which will provide some context to the Staff data being provided.

Mr Marshall referred to the identified risk of no recurrent funding for the Rural eHealth Program and noted that this has been raised at the MOH level.

In relation to the lack of Coders causing an impact on the coding backlog, it was suggested that there is potential for a Senior Medical Records Manager for the LHD who would be able to advocate in relation to the number of Coders required to address backlogs and to ensure that Coders continue to maintain their skills and that ongoing training is available. The Board indicated that the lack of Coders is a priority and needs to be resolved so that NNSW LHD is in a better position in 2016/17 and an overall approach involving Medical Officers to assist in making coding easier.

Ms Symes reported that a Plan has been developed to address the coding backlog however it will require some funding to be made available.

Dr Collie asked that the F&PC to look at the GBH Emergency Patient Treatment Performance result which is significantly less than other LHD facilities and whether there is a structural or performance issue that needs to be addressed and provide advice to the F&PC.

The unconfirmed Minutes of the F&PC Meeting held on 20 January 2016 were noted.

10.2 Health Care Quality Committee (HCQC)

Ms Kew provided a verbal report on the HCQC Meeting held 8 December 2015.

Ms Kew advised the HCQC received a presentation on the new Incident Management System and HETI will be attending the LHD to provide Train the Trainer education for relevant Staff.

HCQC endorsed the Clinical Policies, Guidelines and Procedures which were submitted to the Committee.

Ms Kew reported that the Between the Flags results continues to be a concern and the Board Chair is corresponding with the Visiting Medical Officers and Attending Medical Officers setting out the requirements for them to comply with the Between the Flags Policy and to document clinical reviews and rapid responses. The draft letter was tabled for the Board's consideration. Board members provided feedback to the Board Chair and suggested that the letter needs to be more engaging and the wording in first paragraph be amended to read "We are unclear on the reasons for this and are seeking your support to correct this situation."

The Board sought advice on the cost of an automated system for Rapid Response calls in wards that are located in Wards at Orange Hospital and requested that the Acting Chief

Executive provide advice back to the Board on costing for an automated Rapid Response System.

Ms Kew indicated that work continues on the Clinical Governance Framework and it will be submitted to the Board for consideration in due course.

An excellent report was received from Dr David Hutton, Executive Director Clinical Governance on End of Life care programs that are occurring across the State which are very informative.

Ms Kew noted that Death Screening at TTH remains an issue that needs to be resolved and Ms Loughnane has been requested to ensure that this occurs as soon as possible.

The unconfirmed Minutes of the HCQC Meetings held on 8 December 2015 were noted.

Action:

Ms Symes, Acting Chief Executive is to provide advice to the 2 March 2016 Board meeting on the costings to install an automated system for Rapid Response Calls that are utilised at Orange Hospital.

10.3 Medical and Dental Advisory Appointments Committee (MDAAC)

The Chair queried whether there will be advertising for two Ear, Nose and Throat Specialists for the Richmond Valley. Ms Symes advised that she will follow-up and provide feedback to the Board Chair.

The unconfirmed Minutes of the MDAAC Meeting held on 10 December 2015 were noted.

Action:

Ms Symes is to make enquiries on whether there will be advertising for two Ear, Nose and Throat Specialists for the Richmond Valley and provide feedback to the Board Chair.

10.4 Health Services Development Committee (HSDC)

The unconfirmed Minutes of the HSDC Meeting held on 3 December 2015 were noted.

10.5 Audit and Risk Committee (ARC)

Mr Frazer provided a verbal report on the ARC Committee Meeting held on 4 December 2015.

Mr Frazer indicated that the ARC noted the excellent Workers Compensation results for the LHD which have been achieved by Ms Yvette Bowen, Manager Work Health and Safety and Injury Management. The Board Chair requested that a letter is forwarded to Ms Bowen acknowledging the excellent results that she has been able to achieve for the LHD on Workers Compensation.

Mr Frazer also advised the new Risk Management processes including the new Enterprise Wide Risk Management System were discussed in detail.

The unconfirmed Minutes of the ARC of the 4 December 2015 were noted.

Action:

Ms Symes is to forward a letter to Ms Yvette Bowen, Manager Work Health and Safety and Injury Management acknowledging the excellent results that she has been able to achieve for the LHD on Workers Compensation.

10.6 NNSW LHD Clinical Council (CC)

The Board noted that a verbal report of the CC Meeting held on 24 November 2015 was provided at the 2 December 2015 Board Meeting.

The unconfirmed Minutes of the CC Meeting held on 24 November 2015 were noted.

10.7 Community Engagement Advisory Council (CEAC)

The Board noted the next CEAC Meeting is scheduled on 21 March 2016.

10.8 Medical Staff Executive Council (MSEC)

The Board noted the next MSEC Meeting is scheduled on 17 March 2016.

10.9 NNSW LHD Interim Aboriginal Partnership Meeting (APM)

The Board noted the next APM is scheduled on 7 March 2016.

10.10 NNSW LHD Mental Health Forum (MHF)

The unconfirmed Minutes of the MHF held on 7 December 2015 were noted.

10.12 Health Education Workforce Research Forum (HEWRF)

The Board noted that the next HEWRF meeting is to be scheduled.

10.13 Minutes of the Drug and Alcohol Community Advisory Committee (DACAC)

The Board noted that a verbal report of the DACAC held on 2 December 2015 was provided at the 2 December 2015 Board Meeting.

The unconfirmed Minutes of DACAC held on 2 December 2015 were noted.

***11. Items for Decision/Resolution**

11.1 Office-Holder and Board Committee Suggested Appointments

The Board ENDORSED the proposed Office-Holder and Board Committee Appointments for 2016.

Moved: Mr David Frazer

Seconded: Ms Rosie Kew

CARRIED

11.2 Request for Sealing of Multipurpose Services Program Deeds of Variation for Urbenville and Kyogle MPS

The Board ENDORSED the Sealing of the Deeds of Variation for Urbenville and Kyogle Multipurpose Services.

Moved: Mr David Frazer
Seconded: Mr Mark Humphries
CARRIED

12. Items without Notice/Late Business

- Dr Jean Collie raised concern regarding Preferred Provider Arrangements with a number of Universities in relation to Allied Health students from July 2016. Dr Collie suggested that the Board needs to have a view in relation to whether there is a limit to Universities that are based in southern Queensland plus Southern Cross University being able to provide students, is in the best interest of NNSW LHD.

Ms Kew noted that the historically the flow of Allied Health students for the Clarence Valley has been from Universities from NSW, such as Newcastle and Charles Sturt.

Ms Symes tabled a Brief that had been prepared by Ms Vicki Rose, Executive Director Allied Health and Manager Chronic and Primary Care that outlined the number of Student Placement Agreements (SPA) that NNSW LHD has with Education Providers which showed that there are 86 SPAs currently in place. Ms Symes noted that Ms Rose will be consulting with the relevant Clinical Heads for the purpose of determining Preferred Partner priorities in each of the disciplines and following this consultation a presentation will be made to the Allied Health Council for consideration. An LHD Clinical Placement Strategic Report will then be provided to the NNSW LHD Executive and following endorsement discipline specific meetings will be held to discuss the clinical placement program planning and distribution of clinical placements.

The Board requested that it receive an update on what progress has been made on Preferred Partner Arrangements for Allied Health Placements to the 2 March 2016 Board Meeting.

Action:

Ms Symes is to provide an update report on what progress has been made on Preferred Partner Arrangements for Allied Health Placements to the 2 March 2016 Board Meeting.

- Mr Marshall sought a suitable date for the Board panel to undertake interviews for the NNSW LHD Chief Executive position. The Board panel agreed that the 18 March 2016 was a suitable date to hold the interviews which will be held at Tweed Heads.

- Dr Sare enquired on whether the Board has a “policy tree” that provides advice on the Board’s deliberations. The Board responded that the Board Minutes are provided on the NNSW LHD internet site and the Board has a Decision and Resolution Register of all decisions made by the Board.

The Board advised that all representation to the Board should be made via the Sub-Committees of the Board or via the Chief Executive Office.

13. Items for Noting

13.1 Letter from the Chief Executive dated 11 December 2015 to Dr Mary Foley, Secretary, MOH advising that the NNSW LHD Board has declared the Byron District Hospital (BDH) surplus to NNSW LHD needs

The Chair stated that now the BDH site has been declared surplus to NNSW LHD needs it will need to be managed so that it does not become vandalised.

Ms Symes advised that discussions have occurred with Health Infrastructure concerning a transition plan involving security for both the BDH and Mullumbimby District Hospital sites. The Chair suggested that a loan is sought to fund the demolition of the BDH site as soon as possible.

The Chair reported on a meeting he attended with Dr Michael Pelmore from Mullumbimby District Hospital to discuss the future of that site and how that site will be remediated in relation to the asbestos removal. The Chair advised that he had indicated NNSW LHD would consult with the Community on the future of the land and that currently there is no firm costing to undertake the remediation of the site and no health services will be operated from that location. The Chair indicated that Dr Pelmore had advised on a proposal that the site could be used for Community/affordable housing which would be funded via government community grants.

The Chair requested that Ms Symes seek advice from Health Infrastructure and Damien Chappelle on costings to demolish the Byron District Hospital and remediate Mullumbimby District Hospital.

Action:

Ms Symes is to seek advice from Health Infrastructure and Damien Chappelle on costings to demolish the Byron District Hospital and remediate Mullumbimby District Hospital.

13.2 Letter from Board Chair to Dr Jean Frederic Levesque, Chief Executive Bureau of Health Information dated 7 December 2015 thanking him for presenting to the 2 December 2015 Board Meeting and being the Keynote Speaker at the NNSW LHD Annual Community and Stakeholder Meeting

Noted

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- 13.3 Letter from the Hon Ken Wyatt AM, MP, Assistant Minister for Health to the Board Chair concerning receipt of copy of NSW LHD Integrated Aboriginal Health and Wellbeing Plan**
Noted
- 13.4 Letter from Elizabeth Koff, Deputy-Secretary, Strategy and Resources, MOH concerning the LHD's request that a higher DRG be given to the treatment of Patients living alone.**
Noted
- 13.5 Letter from Chris Crawford, Chief Executive, dated 8 December 2015 to Stewart Dowrick, Chief Executive, Mid North Coast LHD concerning Patient flows from the Clarence Valley to the Coffs Harbour Base Hospital**
Noted
- 14. Items for Information:**
- 14.1 Media Release from Jillian Skinner, MP Minister for Health on State's Coronial and Forensic Medicine Headquarters being relocated**
Noted
- 15. Close of Meeting**
There being no further official business, the Chair declared the meeting closed at 5.50 pm
- 16. Date and Time of next Board Meeting**
Wednesday, 3 March 2016 commencing at 12.30pm in the Rooms 1 and 2, TCERI Education Centre, The Tweed Hospital, Tweed Heads

I declare that this is a true and accurate meeting record.

Signed
Dr Brian Pezzutti
Northern NSW Local Health District



Date 11/3/16