

**MINUTES OF THE MEETING OF THE NORTHERN NEW SOUTH WALES LOCAL HEALTH DISTRICT BOARD HELD ON WEDNESDAY 28 MARCH 2018 AT UCRH MEETING ROOM, MURWILLUMBAH HOSPITAL, EWING STREET, MURWILLUMBAH COMMENCING AT 9.00AM**

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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.

**1. In-camera Session**

No In-camera session was required.

**2.1 PRESENT AND APOLOGIES:**

Dr Brian Pezzutti, (Chair), Mr David Frazer, Mr Mark Humphries, Dr Joe Ogg, Dr Allan Tyson  
Dr John Griffin, Ms Carolyn Byrne, Ms Deb Monaghan, Mr Michael Carter, Dr John Moran

**Via teleconference**

Professor Susan Nancarrow

**In Attendance:**

Mr Wayne Jones (Chief Executive)  
Ms Kerryn Taylor (Secretariat) Acting for Ms Jenny Cleaver  
Ms Kate Greenwood (Secretariat)  
Ms Corinne Martin (Acting Community Engagement Manager)

**For part of meeting:**

Dr David Hutton, Director Clinical Governance  
Mr Ian McLeish, Acting General Manager Mental Health, Drug and Alcohol and Stream Services  
Dr Richard Buss, Director Workforce  
Mr Matt Long, Director Corporate Services  
Ms Lynne Weir, Director Clinical Operations  
Ms Katharine Duffy, Director Nursing, Midwifery and Aboriginal Health

**Apologies:**

Mr Pat Grier,  
Mr Brett Skinner, Director Finance  
Ms Vicki Rose, Director Integrated Care and Allied Services (AL)

**2.2 Declaration of Pecuniary and/or Conflicts of Interest**

No declarations of pecuniary and/or conflicts of interest were declared.

**2.3 Previous Minutes:**

**2.3.1** The Minutes of the Board Meeting held on 28 February 2018 as circulated were ENDORSED as a true and accurate record of the meeting.

Moved: Mr David Frazer  
Seconded: Ms Deb Monaghan  
CARRIED

### **2.3.2 Business Arising from the Minutes:**

#### **2.3.2.1 Dr Hutton is to seek input from the Health Care Quality Committee on the potential to categorise complaints and to provide feedback to the 28 March 2018 Board meeting.**

Dr Hutton spoke to the information contained in the brief and Ms Byrne raised her concerns around the follow up on the recommendations after a complaint and whether the recommendations are implemented. While categorising complaints is time consuming, Mr Jones responded that this is necessary to understand where the complaints are coming from and where the resources need to be invested to address the issue.

Dr Hutton gave a brief overview of the importance of IIMS and how it is utilised to capture and store data and general discussion followed on the difference between an IIMS report and a clinical incident.

Dr Ogg queried the data around the length of time to resolve a complaint through to completion. Dr Hutton responded that there are some complaints that are enormously challenging to follow up and investigate appropriately. However, all complaints are followed through to completion even though some of these processes can take a number of months. The MOH sets complaints benchmarks realising that there are a proportion of complaints that can inherently take longer.

Ms Weir advised the Board that when a complaint is received, the complainant is contacted and considerable work is done in the background and possible meetings organised. The complaint cannot be closed until this process is complete and this can often take longer than 35 days.

#### **2.3.2.2 Mr Jones is to provide an updated report on NSW LHD ETP and activity concerning the new strategies that are being implemented to improve LBH ETP performance to the April 2018 (2 May) Board Meeting.**

The Board noted that Mr Jones will provide an updated report on NSW LHD ETP and activity concerning the new strategies that are being implemented to improve LBH ETP performance to the April 2018 (2 May) Board meeting.

#### **ACTION:**

**Mr Jones is to provide an updated report on NSW LHD ETP and activity concerning the new strategies that are being implemented to improve LBH ETP performance to the April 2018 (2 May) Board Meeting.**

#### **2.3.2.3 Mr Wayne Jones is to request Mr Matt Long, Director Corporate Services to provide a brief for the Council of Board Chairs meeting scheduled on 19 March 2018 that outlines the current hybrid nature of the EMR in accessing patient information with information systems such as ERIC and CERNER EMR**

The Board noted that Mr Matt Long, Director of Corporate Services provided a brief for the Council of Board Chairs meeting scheduled on 19 March 2018 outlining the current

hybrid nature of the EMR in accessing patient information with information systems such as ERIC and CERNER EMR.

The brief was not circulated at the Council of Board Chairs meeting, however was discussed at great length. The Board Chair advised the Board that Ms Elizabeth Koff, Secretary of Health will review the brief.

**2.3.2.4 Mr Jones is to ensure that frameworks surrounding operational roles and other avenues for issues to be addressed before being raised to the Board is to be included in the new Board Members orientation program.**

The Board noted that frameworks surrounding operational roles and other avenues for issues to be addressed before being raised to the Board will be included in the new Board Member orientation programs.

**2.3.2.5 Mr Jones is to request Dr Richard Buss, Director of Workforce to provide a report on progress being made on the development of the NNSW LHD Cultural and Well-being Plan against the KPI's to the 28 March 2018 Board Meeting.**

Dr Buss advised the Board that there are three major components currently being worked on.

The first being the People Matter Survey including the redesign of the backbone of the survey to give a better break down of staff across the NNSW LHD and Mr Dennis Pfitzner, Cultural and Well-being Officer is visiting sites. Last year one-hundred hard copies were ordered for the staff, this year 2500 have been ordered due to some staff not accessing the online survey.

Secondly, Moments of Truth will be implemented at the Ballina and Byron Hospitals. Thirdly, an EOI has been sent out for the Cultural and Well-being Committee with the view to having a broad-spectrum of staff members on the committee.

The Board Chair queried the frequency of Exit Interviews to capture the culture of a place and how this information can be collected and stored. Mr Jones responded that they are not undertaken as often as they should, particularly with Senior Clinicians. Dr Buss advised that there is an Exit Interview Form that can be completed and sent to Workforce. The themes of this is looked at and the appropriate department is advised of the generic issues that have been raised. Staff completing an Exit Interview Form receive a letter thanking them for their feedback.

Dr Moran raised his concerns regarding the recent resigning of several clinicians simultaneously from a hospital within the LHD. Mr Jones informed the Board that he would look further into the reason behind this to learn from it.

**ACTION:**

**Mr Jones is to request Ms Lynne Weir to meet with Clinicians from Murwillumbah District Hospital that have recently resigned.**

A query was raised regarding the Conflict Resolution Workshops Project being at the bottom of the progress report. Dr Buss informed the Board that this was not one of the

packages that was presented under Cultural and Well-being and therefore wasn't one of the packages that went to the Board. This was recently added and its position as last on the list is not indicative of its importance.

The Board requested that an amendment be made to the project item – *value statement* with the inclusion of it being signed by the Board, together with Chief Executive and Executive to indicate the commitment by the Board to the Public Value Statement.

**ACTION:**

**Mr Jones is to request Dr Richard Buss, Director Workforce amend the project item – *value statement* with the inclusions of it being signed by the Board, together with Chief Executive and Executive to indicate the commitment by the Board to the Public Value Statement.**

**2.3.2.6 Dr Alex Stephens, Director of Research will attend the 2 May 2018 Board meeting and present on his role as the Director of Research.**

The Board noted Dr Alex Stephens, Director of Research will attend the 2 May 2018 Board meeting and present on his role.

**ACTION:**

**Dr Alex Stephens, Director of Research will attend the 2 May 2018 Board meeting and present on his role as the Director of Research.**

**2.3.2.7 Ms Katharine Duffy, Director Nursing, Midwifery and Aboriginal Health is to provide information on what sepsis training is available to new graduate nursing and midwifery staff to the 28 March 2018 Board meeting.**

Ms Katharine Duffy spoke to the information contained in the brief advising the Board that new graduate nurses receive a blended learning experience over the first year post qualification with to face to face workshops including simulation, online learning, self-directed packages and structured group reflection. Ms Duffy informed the Board of the orientation process for new nurses and midwives around sepsis training when joining the LHD initially.

The Board Chair queried whether sepsis training is incorporated in undergraduate training and asked Ms Duffy to investigate this further.

**ACTION:**

**Ms Katharine Duffy, Director Nursing, Midwifery and Aboriginal Health is to provide information on what sepsis training is available to undergraduate nursing and midwifery students to the 2 May 2018 Board meeting.**

General discussion followed around the varying standards from a number of universities regarding junior medical students' basic clinical practices and the possibility of feedback to these institutions.

**2.3.2.8 Mr Jones to request Dr Richard Buss, Director Workforce to advise the reasons**

why the current EAP provider was engaged and whether the provider is able to survey the LHD clients who access this service to seek feedback from the individual on their satisfaction level with the service.

The Board noted the information contained in the brief and acknowledged that this was the finalisation from the brief discussed at the previous Board meeting on 28 February 2018.

**2.3.2.9 Mr Jones is to ask Mr John Wickham, Medical Administration Manager to provide an updated brief to the Board on the status of the VMO reappointments to the 28 March 2018 Board Meeting.**

Mr Jones informed the Board that VMO reappointments are progressing well with only one formal response not agreeing with the contract, with this being a minor issue. Productive discussions have recently occurred with LBH Anaesthetists and contracts have been sent accordingly and there has been a positive response from the Tweed Heads Hospital Anaesthetists.

There will be further clarification around the retrieval hours for the LBH Physicians upon Ms Katherine Willis-Sullivan, Director Medical Services return from leave.

Mr Jones advised the Board that at this stage he is hopeful the VMO contract process will be complete by the 30 June 2018 deadline.

**ACTION:**

**Mr Jones is to ask Mr John Wickham, Medical Administration Manager to provide an updated brief to the Board on the status of the VMO reappointments to the 2 May 2018 Board Meeting.**

**2.3.2.10 Mr Jones is to request Ms Vicki Rose, Director Integrated Care and Allied Health facilitate the requested changes to the NSW LHD Domestic and Family Violence Prevention and Response Action Plan 2018-2020 and respond to the Board's queries concerning Elder Abuse and Aboriginal DV victims and provide an updated plan to 2 May Board meeting for further consideration.**

The Board noted that Ms Vicki Rose, Director Integrated Care and Allied Health will provide this information to the 2 May 2018 Board meeting.

**ACTION:**

**Mr Jones is to request Ms Vicki Rose, Director Integrated Care and Allied Health facilitate the requested changes to the NSW LHD Domestic and Family Violence Prevention and Response Action Plan 2018-2020 and respond to the Board's queries concerning Elder Abuse and Aboriginal DV victims and provide an updated plan to 2 May Board meeting for further consideration.**

**2.3.2.11 Mr Wayne Jones is to request Dr Hutton provide advice on the management of the ACI model of care for fractured neck of femur pathway and advise of any roadblocks occurring in areas such as sub-acute and ED at The Tweed, Lismore Base and Grafton Base Hospitals and how these being addressed.**

Dr Hutton advised the Board that progress is underway with standardizing the hip fracture pathway, including the ortho-geriatric model of care in consultation with clinicians and the site managers of Grafton, Lismore and Tweed Heads hospitals. Mr Jones informed the Board that 68% of these patients had shared care, being seen by a Physician/Geriatrician.

General discussion followed in relation to audits and the Board Chair reiterated his suggestion to include data on the number of audits undertaken across the LHD in his report at the NSW LHD Annual General Meeting.

**ACTION:**

**Mr Jones to request Dr Hutton, Director Clinical Governance provide a brief explaining the breadth of audits undertaken across the LHD to the 30 May 2018 Board meeting.**

**2.3.2.12 Mr Jones is to request Ms Corinne Martin, Acting Community and Engagement Officer provide an updated brief addressing the issue of paying volunteers to the 28 March 2018 Board meeting for consideration.**

The Board noted that the updated brief will be addressed at the 2 May 2018 Board meeting.

**ACTION:**

**Mr Jones is to request Ms Corinne Martin, Acting Community and Engagement Officer provide an updated brief addressing the issue of paying volunteers to the 2 May 2018 Board meeting for consideration.**

**2.3.3 Other Matters Arising from the Minutes**

**5.1.2** The Board Chair raised his concern on the Deloitte Report being challenging to read and has asked Mr Jones for a NSW LHD staff member to translate into a document which is easier to read.

**ACTION:**

**Mr Jones is to request Ms Vicki Rose, Director Integrated Services have the Deloitte report summarised into a brief from the Board for the 30 May 2018 Board meeting.**

**3. Matters for Decision**

**3.1 Summary of meeting with Quality Surveyors**

Mr Frazer spoke to the information contained in the summary and noted that the Quality Surveyors were very happy overall with the Governance of the NSW LHD Board.

It was noted that the general culture and many practical improvements had taken place since the appointment of the new Chief Executive and the new management restructure.

The surveyors also noted the Lismore ED did not have the size of transition discharge units often found at other hospitals.

The surveyor's comments regarding the difference between nursing and medical lead hospitals was also discussed.

### **3.2 NSW LHD Corporate Governance**

The Board noted the information contained in the brief and moved to accept the Development of a NNSW LHD Corporate Governance Plan

**Moved:** Mr David Frazer

**Seconded:** Ms Debbie Monaghan

CARRIED

### **3.3A Review of NNSW LHD Top 10 Strategic Risks**

The Board noted the information contained in the brief and specifically talked about the concerns of losing telephone services during power outages after cut over to the National Broadband Network (NBN). Mr Long advised the Board of the need for UPS protection with battery back-up so in the event of a power outage, the phones will still work across all sites.

The Board Chair also made reference to aggressive behaviour on the risk register and the concerns around the ageing population, dementia and the aggression associated with that.

The Board resolved to endorse the review of the NNSW LHD Top 10 Strategic Risks.

### **3.3B NNSW LHD Risk Management Key Performance Indicator Report**

Dr Hutton spoke to the information contained in the brief noting that having a Risk Management KPI report is to identify emerging risks within the organisation. This is a formal Risk Management KPI and is a process for NNSW LHD to track current levels of risk and act as an early warning system.

General discussion followed around the various results within the report including hospital acquired complications, infection associated with prosthetics/implantable devices and the process involved around annual performance reviews.

## **4. Chairman's Update**

### **4.1 Chairman's Calendar**

The Board noted the Chairman's calendar.

## **5. Matters for Discussion**

### **5.1 Chief Executive's Report**

Mr Jones referred to the issues that were covered in the Chief Executive's Report to the Board, which included:

#### **5.1.1 Current and Significant Issues**

- Clinician Engagement – meetings were held across the LHD including Dr Mike Lindsay TTH Medical Staff Council, Clarence Valley Community Mental Health staff, Ms Connie

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Greenwood Richmond/ Clarence Maternal Services Manager, Dr David Scott Anaesthetist LBH to discuss VMO contracts, Clarence Valley MSC staff, Dr Allan Tyson and Dr Andrew Terry regarding GBH Maternal Services.

- The Tweed Valley Hospital Site selection committee have finalised due diligence and the preferred site has been identified for the Tweed Valley Hospital. The Minister is visiting NNSW LHD in early April to announce the site.
- Richmond management, staff and clinicians are to be congratulated on such an impressive outcome from the recent ACHS Accreditation survey with special mention for Ms Sarah Lawty and Ms Helen Mitchell who worked tirelessly to ensure the quality and effectiveness of the services across the Valley were reflected in the survey.
- NSW Motor Accident Authority changes to NSW CTP Green slip schemes came into effect 1 December 2017, significantly impacting the process for VMO Specialists to recoup payment for care of compensable patients.

**ACTION:**

**Mr Jones to draft a letter for the Board Chair's signature thanking Ms Sarah Lawty and Ms Helen Mitchell for their effort with the recent ACHS Accreditation survey.**

**5.1.2 Update on Strategic Issues**

The Board noted the NNSW LHD 2017/2018 Health Performance Framework Strategic Priorities and Initiatives Six-Month Update report.

**5.1.3 Update on Strategic Plan Implementation**

The Board noted the February 2018 Aboriginal Health Dashboard report for NNSW LHD and noted that Northern NSW has the highest result for fully breastfeeding on discharge from hospital rates for Aboriginal mothers across the state and also the high rate of aboriginal children fully immunised across the LHD. .

**ACTION:**

**Mr Jones to draft a letter for the Board Chair's signature for the midwives across the LHD, commending them on the outstanding result of both aboriginal and non-aboriginal women fully breastfeeding on discharge from hospital.**

**ACTION:**

**Mr Jones to draft a letter for the Board Chair's signature to be sent to all Aboriginal Medical Services within the LHD commending them on their dedicated work in achieving such a high result in aboriginal children fully immunised across the LHD.**

**5.1.4 Matters for Approval**

Nil for this meeting.

**5.1.5 Major Key Performance Indicators**



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- The Board noted that the result for Emergency Treatment Performance (ETP) during February 2018 was 79% against the target of 81%.
  - Elective Surgery Access Performance (ESAP) Category 2 and 3 targets were not met during February 2018. The results were as follows: Category 1, 100% against a target of 100%, Category 2, 95% against a target of 97% and Category 3 was 96% against a target of 97%
  - NSW LHD met all triage targets. All triage categories were equal to or greater than the February 2017 results.
  - The Transfer of Care result for February 2018 was 90% against a target of 90%.

#### **5.1.6 Risk and Compliance Update**

It was noted that the first Quarter WHS&S Report for 2018 will be provided at the 2 May 2018 Board meeting.

#### **5.1.7 Governance Update**

NNSW LHD Health Emergency Management Committee will now be a Board sub-committee with two Board members being Dr John Moran and Dr John Griffin on the committee.

#### **ACTION:**

**The NNSW LHD Health Emergency Management Committee is to be added to the 2018 Board Calendar with dates to be set out for the remainder of the year.**

#### **5.1.8 Capital Works/Planning Projects**

- “Old” Byron Bay Hospital site – NNSW LHD Executive held recent discussions with various stakeholders including Byron Bay Shire Council, Mr Ben Franklin, Parliamentary Secretary for the North Coast and Ms Tamara Smith, Member for Ballina. The Minister of Health will be supporting a further extension of two months for the deadline to receive community submissions as the land valuation has been delayed pending formal advice from the review of the soil.
- Bonalbo MPS – NNSW LHD have not formally taken receipt of the MPS pending finalisation of rectification works with Health Infrastructure progressing these works to support handover.
- The Tweed Hospital “Holding Works” – with the planning and design process nearly complete, more robust building and completion times will be announced after final consultation with management, clinicians and staff.
- LBH Operating Theatres – scheduled date for moving to the new operation theatre will be 4 April 2018.
- Renal Dialysis Unit at Murwillumbah – tenders for building works have closed with anticipation of building works to be complete by July 2018.

#### **5.1.9 Matters for Noting**

- Recent visit to SWSLHD to explore a range of issues including attending Asset and Finance Board Sub-committee meeting, review of Staff Engagement Program, Revenue Program, Patient Flow Program and Research and Education Programs.

- Health Innovations Conference – NNSW LHD held a Health Innovations Conference on the 10-11 March 2018 at Kingscliff
- Commonwealth Games – Workforce planning has been concluded although transport challenges for staff, NSW and QLD Ambulance remain a concern. Modest changes will be made to the elective surgery schedule with surge beds opened for the duration of the Games.
- BUPA “No Gaps Cover” – BUPA recently announced intentions to cease the option of “No Gap Cover” for BUPA insured patients in public hospitals, significantly impacting NNSW LHD ability to meet private revenue targets. NNSW LHD will be formally lodging our concerns to the MOH as part of our budget/activity negotiations for 2018/19.

#### **5.1.10 Important Meetings/ Diary Commitments**

NNSW LHD Quality Awards Night is scheduled for Friday 15 June 2018 at the Twin Towns Services Club in Tweed Heads.

#### **5.1.11 Questions for the Chief Executive without Notice**

- Mr Jones informed the Board that Murwillumbah Hospital will have a future going forward and further community and clinician discussion will follow around this once the announcement of The Tweed Valley Hospital site is announced.
- The Board Chair raised his concerns regarding the difficulty in reading the Selected Performance Indicators by LHD and Network and would like the MOH to re-do this in a format that is easier to read and understand.
- Mr Jones advised the Board that the LHD is aware of the poor result in staff completing “Respecting the Difference” face to face training and strategies were in place to rectify this
- Mr Frazer raised an issue regarding the recent media coverage of non-indigenous nurses acknowledging white privilege to indigenous patients before commencing treatment. Mr Jones responded that he was unaware of this development and would respond to the Board upon further clarification.
- Dr Tyson raised Grafton Ambulatory Care concerns, requesting an update on progress. Mr Jones advised that he was under the understanding that it was with Treasury or Health Infrastructure.
- Mr Jones informed the Board that the Tender Evaluation Committee had received one submission for Surgical Services at Bryon that did not meet the set criteria.

#### **ACTION:**

**Mr Jones to express the Board’s concern to the Ministry of Health over the format and information contained in the Selected Performance Indicators report.**

#### **ACTION:**

**Mr Jones to seek further clarification on the recent media coverage of non-indigenous nurses acknowledging white privilege to indigenous patients before commencing treatment and report back to the 2 May 2018 Board meeting.**

The Board **ENDORSED** the Chief Executive’s Report.

## **5.2 Committee Minutes (discussed on exception basis otherwise noted)**

### **5.2.1 Health Care Quality Committee (HCQC) – 13 March 2018**

Dr Ogg, Chair, HCQC provided a verbal report of the HCQC Meeting held on 13 March 2018.

Dr Ogg advised the Board that there is still a lot of discussion at the HCQC meeting around Advanced Care Directives (ACD) with the LHD and North Coast Primary Health Network regarding the legal issues with terminology and the varying implications of the ACD's.

It was noted in the annual Australasian Rehabilitation Outcomes Centre (AROC) reports that two of the three Rehabilitation Centres across the LHD are showing cost inefficiencies. Ms Weir will follow up and report back to the April 2018 HCQC meeting. Dr Tyson advised the Board that staffing has been a concern in the Rehabilitation Centres and queried Mr Jones on the possibility of securing a Rehabilitation Specialist. Ms Weir responded that currently there is no plan in place for this but will look into this at Maclean Hospital.

Dr Ogg informed the Board regarding the large amount of resources and training being undertaken with mental health staff due to it being the number one risk on the Strategic Risk Register.

Mr Jones advised the Board that he has had the opportunity to look at the draft recommendations of the Seclusion and Restraint Report and a draft action plan is being developed for local implementation.

The Board Chair raised his concerns over delays in discharging NDIS clients back to the community following a hospital admission. General discussion followed in relation to the lack of nimbleness with NDIS around homeless people and mental health.

Discussion followed around space for Hospital in the Home within Lismore and Dr Ogg was reassured by Ms Weir there are provisions for Hospital in the Home in The Tweed Valley Hospital Development Plan.

Dr Ogg advised the Board that the Ms Duffy has confirmed that there is a two-day workshop for Nurse Unit Managers (NUM) and extra training regarding deteriorating patients and sepsis.

The Board noted the HCQC Meeting Minutes of 13 March 2018.

### **5.2.2 Finance and Performance Committee (F&PC) – 21 March 2018.**

Mr Humphries provided a verbal report of the F&PC meeting held 21 March 2018.

Mr Humphries reported that Own Source Revenue results have been impacted by the Treasury Managed Funds (TMF) Hindsight to the value of approximately \$2.5 million. Mr Jones explained how the process has occurred and that Mr Skinner, Director Finance is currently in Sydney to further explore this concern.

LBH insurance recovery for the POD was reduced from \$1.0 million to \$0.5 million.

Coding has increased during the month with The Tweed Hospital being up to date and offering assistance to LBH.

NWAU performance in the LHD was ahead of target in Emergency NWAU earlier in this financial year and is now 1.3% YTD behind target. For Acute NWUA performance for December /January it was noted the average acuity of patients is down approximately 4%. Pavilion has not audited this period yet and this will be closely reviewed. Pavilion have reported an increase in the level and accuracy of the coding coming from the LHD.

Mr Jones advised the Board that at this stage there is a projected \$4.8 million shortfall in revenue, but is still projecting to come in on the expenditure budget. There are concerns around this if the level of activity continues in acute bed admissions, DVA declining activity and lower revenues in patient fees.

Mr Jones advised the Board that the budget is under extreme pressure driven by activity and strategies are being implemented to reduce the impact.

General discussion followed around the increased activity across the LHD and the budget going forward.

The Board noted the F&PC meeting minutes of the 21 March 2018.

### **5.2.3 Medical and Dental Appointments Advisory (MDAAC) Committee – 8 March 2018.**

Dr John Moran left the meeting for the MDAAC committee report.

Dr Tyson provided a verbal report of the MDAAC meeting held on 8 March 2018 advising of a number of resignations including Dr John Moran from the Murwillumbah Hospital.

Dr Moran and Dr Doug Warne have requested to be Honorary VMO's so they can continue in their clinical privileges for teaching purposes. This recommendation has passed and has been forwarded to the Chief Executive for signing.

Dr Tyson advised of recent new appointments including a VMO Specialist Surgeon in Lismore and a number of appointments for Radiologists.

The Board was advised that a new Obstetrician/Gynaecologist has commenced and that there was still another vacancy for this role at GBH.

Dr John Moran re-joined the meeting.

The Board noted the MDAAC Meeting Minutes of the 8 March 2018.

### **5.2.4 Health Services Development Committee (HSDC) – 8 February 2018**

Dr John Griffin gave a verbal report on the HSDC meeting minutes dated 8 February 2018.

A brief overview was given on the presentation of Mr Tomas Ratoni on the Paediatric Hospital in the Home Model of Care which centred around two young patients with very complex and wide ranging disabilities and how the Hospital in the Home team co-ordinates, supports and advises on the potential treatment to ensure these two young patients are cared for accordingly.

Dr Griffin advised the Board that the Terms of Reference will be restructured to reflect the new organisational structure within the LHD.

Mr Jones informed the Board that the MOH have advised of mandatory influenza vaccination for all category A staff, particularly high risk areas. If staff disagree with this there are options of wearing a mask or staff being re-deployed to a non-high risk clinical area for the winter period.

The Board noted the HSDC Meeting Minutes of the 8 February 2018.

**5.2.5 Audit and Risk Committee (ARC)– next meeting 14 March 2018.**

The Board noted the next Audit and Risk Committee meeting minutes will be submitted to the 2 May Board meeting including:

- The Auditor General's report to parliament did not mention the NNSW LHD.
- NSW Health had an operating surplus \$407 million for 2016/17 with eleven LHD's operating with a deficit. There were four LHD's and NSW Ambulance receiving cash assistance during that year.
- A new overdue report of matters that have been raised by the Internal Auditor has been received.

Professor Susan Nancarrow left the meeting.

**5.2.6 Clinical Council (CC) –next meeting 1 May 2018**

The Board noted the next Clinical Council meeting will be held on 1 May 2018.

**5.2.7 Community Engagement Advisory Council (CEAC) –19 March 2018**

The Board noted the CEAC meeting minutes will be submitted to the 2 May Board meeting.

**5.2.8 Medical Staff Executive Council (MSEC) – date to be advised**

The Board noted the next MSEC Meeting date is yet to be advised.

**5.2.9 Aboriginal Partnership Meeting (APM) – 5 March 2018.**

The Board noted the Aboriginal and Partnership meeting minutes will be submitted to the 2 May 2018 Board meeting.

**5.2.10 Mental Health Forum (MHF) – next meeting 9 April 2018.**

The Board noted the next MHF will be held on 9 April 2018.

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**5.2.11 Health Education Workforce Research Forum (HEWRF)– next meeting 8 May 2018.**

The Board noted the next Health Education Workforce Research Forum will be held on 8 May 2018.

**5.2.12 Drug and Alcohol Community Advisory Committee (DACAC) – next meeting 12 April 2018.**

The Board noted the next DACAC meeting will be held on 12 April 2018.

**6. Matters for Noting/Information (discussed only on exception basis)**

**6.1 Major correspondence**

There was no major correspondence for noting.

**6.2 NNSW LHD Seal**

There were no items requiring the NNSWLHD Seal to be applied.

**6.3 Updated Board Calendar**

The Board noted the updated 2018 Board Calendar with the re-scheduled Combined Board meeting with NCPHN now to be held on 2 May 2018 at Crawford House meeting room 9.30am -11.30am followed by NNSW LHD Board meeting at Casino Memorial Hospital.

**6.4 Other matters for noting**

**6.4.1 Expansion of Cardiac Catheter Lab Service at LBH**

It was noted that Ms Lynne Weir, Director Clinical Operations will submit her update to the 2 May 2018 Board meeting.

**6.4.2 Dr Pezzutti informed the Board of a letter received from a Coraki community member thanking the LHD for the HealthOne which has recently been added and also raised concerns on when a GP would be available.**

**7. Meeting Finalisation**

**7.1 Next Meeting**

2 May 2018

Combined Board meeting with NCPHN, Crawford House 9.30am-11.30am

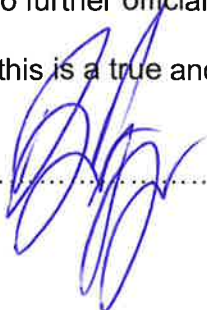
Followed by NNSW LHD Board Meeting, Casino Memorial Hospital commencing with working lunch from 12.30pm -4.30pm.

**7.2 Meeting closed**

There being no further official business, the Chair declared the meeting closed 1pm.

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

Signed .....



Date .....

14/5/18

**MINUTES OF THE MEETING OF THE NORTHERN NEW SOUTH WALES LOCAL HEALTH DISTRICT BOARD HELD ON WEDNESDAY 28 MARCH 2018 AT UCRH MEETING ROOM, MURWILLUMBAH HOSPITAL, EWING STREET, MURWILLUMBAH COMMENCING AT 9.00AM**

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Dr Brian Pezzutti  
Chair  
Northern NSW Local Health District Board