

1. **PRESENT AND APOLOGIES:**

Dr Brian Pezzutti, (Chair), Mr Malcolm Marshall, Dr Joe Ogg, Mr David Frazer, Mr Mark Humphries, Ms Leone Crayden, Deb Monaghan and Dr Alan Tyson

Via Videoconference Ballina: Dr Sue Page

Via Teleconference : Ms Hazel Bridgett

In Attendance : Mr Chris Crawford, Mr Murray Spriggs, Ms Jennifer Cleaver
(Secretariat)

Apologies: Professor Lesley Barclay, Ms Rosie Kew

2. **Declaration of Pecuniary and/or Conflicts of Interest**

No Pecuniary or Conflicts of Interest were declared.

3. **Previous Minutes:**

a) The Minutes of the Board Meeting held on 30 January 2013 were **ENDORSED** with the following amendments:

Page 3 third paragraph should read ""Parking issues at The Tweed Hospital, Mr Bill McKennarley"

Page 6 fifth dot point should read ".....impairment and engages with the carers of the patient..."

Page 20 fourth paragraph fourth line should read ""...which will have an impact on some of the services the LHD provides..."

Page 28 Item 9.4 fourth paragraph should read : "...the proposed plan is concurrent with the MOH priorities."

Moved: Mr Malcolm Marshall

Seconded: Ms Leone Crayden

CARRIED

b) Abridged Minutes of 19 December 2012 for placing on NNSW LHD Internet Site were noted.

4. **Business Arising from the Minutes:**

4.1 **Mr Crawford is to submit a report to the 3 April 2013 Board Meeting or an earlier Board Meeting, if received earlier, on historical and current data on the NNSW LHD recruitment system about the average length of time each clinical discipline takes to recruit staff from the time the advertisement is approved, to when the interview is held and the successful applicant is notified of his/her appointment, both retrospectively and prospectively.**

Mr Crawford advised that the information that had been requested by the Board concerning the NNSW LHD recruitment system will be submitted to the 3 April 2013 Board Meeting for consideration.

Action:

Mr Crawford is to submit a report to the 3 April 2013 Board Meeting or an earlier Board Meeting, if received earlier, on historical and current data on the NNSW LHD recruitment system about the average length of time each clinical discipline takes to recruit staff from the time the advertisement is approved, to when the interview is held and the successful applicant is notified of his/her appointment, both retrospectively and prospectively.

- 4.2 Ms Crayden is to obtain a copy of the Mental Health PowerPoint presentation from the Board Members Conference and forward it to the Board Secretariat for circulation to Board Members for their information.**

Mr Crawford tabled a copy of the Mental Health PowerPoint presentation from the Board Members Conference that had been received from Mr David McGrath, of the Mental Health and Drug and Alcohol Office at the Ministry of Health and he will include a copy in the 3 April 2013 Board Meeting papers for information.

Action:

Mr Crawford is to include a copy of the Mental Health PowerPoint presentation from the Board Members Conference received from Mr David McGrath, of the Mental Health and Drug and Alcohol Office at the Ministry of Health in the 3 April 2013 Board Meeting Agenda Papers for the Board's information.

- 4.3 Mr Crawford is to provide feedback to Ms Rose about the Richmond Clarence Health Service Group Stroke Co-ordinator role and to make sure that she is operating within the duties set out in her position description.**

Mr Crawford also indicated that he has provided feedback on his discussion with Ms Rose to Ms Kew, who had raised this issue.

- 4.4 Mr Crawford will arrange for a paper to be provided to the next Board Meeting, which sets out how the Patient Journey stories that will commence each Board Meeting should be implemented.**

Mr Crawford advised that the Board will be presented with the first Patient Story at its 3 April 2013 Board Meeting.

The Chair indicated that the proposed structure that has been identified for the presenting of the Patient Stories to the Board was well thought out and very comprehensive.

Dr Hutton is to translate the recommendations contained in his briefing document responding to the Clinical Excellence Commission Patient Based Care Challenge into a single page document, which is to include action timelines

Mr Crawford advised that Dr David Hutton, Executive Director Clinical Governance will submit information that translates the recommendations contained in his briefing document responding to the Clinical Excellence Commission Patient Based Care

Challenge into a single page document, which is to include action timelines, to the 3 April 2013 Board Meeting for consideration.

Action:

Dr Hutton is to translate the recommendations contained in his briefing document responding to the Clinical Excellence Commission Patient Based Care Challenge into a single page document, which is to include action timelines, to the 3 April 2013 Board Meeting for consideration.

- 4.5 Mr Crawford is to seek clarification regarding direct admissions to Hospital Wards and report back on this matter to the 6 March 2013 Meeting of the Board.** Mr Crawford advised that he has discussed the issue of direct Hospital admissions with the Executive Directors of both Health Service Groups (HSG) and they confirmed that consistent with NNSW LHD Policy direct admissions to Wards do occur. Mr Crawford indicated that he has reinforced the Direct Admission Policy with the Executive Directors of the HSGs and has requested that they follow-up to ensure that, where possible, the Direct Admission Policy is implemented at Lismore Base and The Tweed Hospitals.

The Chair noted that the issue that had been raised by Dr Page related to where a referral is made specifically for a patient to have a consultation with a particular Specialist, it is important that every effort is made to ensure that such a consultation takes place.

The Chair suggested that the operation of the Direct Admission Policy should be referred to the NNSW LHD Clinical Council for consideration.

Action:

Mr Crawford is to refer the operation of the NNSW LHD Direct Admission Policy to the NNSW LHD Clinical Council for consideration.

- 4.6 David Hutton is to provide a Brief on the implementation of Root Cause Analysis (RCA) recommendations, including the communication of their implementation to RCA Team Members and interested Clinicians, to the 6 March 2013 NNSW LHD Board Meeting.**

The Chair noted the Brief from Dr Hutton that provided a status report on the implementation of RCAs investigation recommendations from January 2011 to October 2012.

The Chair reported that Dr Hutton has advised that a further Brief will be provided to the Board following work that is currently underway by Clinical Governance Unit (CGU) Staff on the feedback process on the approval and implementation of RCAs to Clinicians. Mr Crawford advised that the process for feedback on RCAs that is being considered involves the RCAs being placed on the NNSW LHD intranet site with an index system put into place, that will provide easy access for Clinicians to view the RCA information and email advice will be provided to Clinicians, when an RCA becomes available on the intranet site.

Dr Tyson suggested that it would be beneficial for the RCA feedback to be of educational value to Clinicians, to highlight certain aspects of the RCA recommendations to make this information easily available, particularly the salient key points on the outcome of the RCA.

Mr Crawford advised that Dr Hutton will attend the 3 April 2013 Board Meeting to provide an update on the progress being made to improve the feedback process on RCA recommendations.

Mr Crawford also advised that as part of the RCA review process, the CGU also examines trends of RCAs and he noted that the Clinical Excellence Commission (CEC) examines and reports on Statewide trends.

Dr Tyson noted that documentation is distributed by the CEC from time to time when it has identified a trend arising from a review of RCA data.

Action:

Mr Crawford is to request Dr David Hutton, Executive Director Clinical Governance Unit attend the 3 April 2013 Board Meeting to address the issues that have been raised by the Board concerning the implementation of Root Cause Analysis (RCA) recommendations, including the communication of their implementation to RCA Team Members and interested Clinicians.

4.7 Dr David Hutton will list on the next Health Care Quality Committee Meeting Agenda, for discussion, the topic of whether M&M processes should be multi-disciplinary and if so how multi-disciplinary M&M processes should be implemented.

The Chair advised that Dr Hutton will include on the next Health Care Quality Committee the topic of whether M&M processes should be multi-disciplinary and if so how multi-disciplinary M&M processes should be implemented for consideration.

The Chair noted that there has been a growth in the number of M&M meetings that are being conducted with the LBH Radiology Department holding its first M&M Meeting recently.

Dr Tyson commented that GBH has M&M Meetings as part of its Medical Quality Meetings once per month and he is also encouraging the Surgical Group and various other Craft Groups to hold their own M&M meetings.

Dr Ogg indicated that approval has been received to hold multidisciplinary M&M Meetings at TTH and invitations will be extended to various multidisciplinary services to attend M&M Meetings where a specific matter to be discussed requires a wider input and he encouraged the holding of multidisciplinary M&M Meetings at all the main Hospitals.

Action:

Mr Crawford is to request Dr David Hutton to list on the next Health Care Quality Committee Meeting Agenda, for discussion, the topic of whether M&M Meetings should be multi-disciplinary and if so how multi-disciplinary M&M Meetings should be organised.

4.8 Mr Crawford is to refer the issue of ensuring all Clinical Units holding M&M Meetings to the Health Care Quality Committee for further discussion and any necessary action.

Mr Crawford reported that he has requested that the issue of holding M&M Meetings be listed on the next Health Care Quality Committee Agenda. Further, he advised the Board that this topic has been raised with the NNSW LHD Executive.

4.9 David Hutton is to raise the issue of RCA feedback and how it is managed by other NSW Local Health Districts at the next Directors of Clinical Governance Meeting for advice and is to provide the input received to a future Health Care Quality Committee Meeting for consideration.

Mr Crawford advised that Dr Hutton will be raising the issue of RCA feedback and how this is managed by other NSW Local Health Districts at the next Directors of Clinical Governance Meeting for advice and he will provide the input received to a future Health Care Quality Committee Meeting for consideration.

4.10 Mr Murray Spriggs is to provide a Brief that summarises the Award processes currently in place across the LHD and to provide a recommendation on a Board Awards process for the Board's consideration to the 6 March 2013 Board Meeting.

Mr Spriggs referred to the Brief that was provided in the Agenda Papers referring to the local Staff appreciation awards that are currently in place at a number of NNSW LHD Hospitals. Mr Spriggs also noted that the Brief provided a suggested approach on how a Board Staff Appreciation Award and Community and Volunteer Contribution Award could be trialled in 2013.

Mr Crawford advised the Board that Long Service Awards are awarded to Staff who have achieved 10, 15, 20 and beyond each five years of service, and noted that a suggestion has been made in the Brief that the Board could consider making Awards to Staff, who have completed 35 or 40 years of service, at the Board Annual Community Meeting.

Mr Spriggs added that the Board may also wish to consider presenting a community or volunteer contribution award at the Board Annual Community Meeting.

The Board endorsed the Recommendation contained in the Brief with an amendment to the wording of one of the categories for the Awards which was changed from "Improving Efficiency and Value for Money" to "Efficiency and Effectiveness of Service" and the inclusion of a "Partnership and Collaboration" Category.

Moved: Mr Malcolm Marshall
Seconded: Mr David Frazer

CARRIED

- 4.11 Mr Crawford is to ask Ms Sue Walker, Public Relations Officer, to arrange a framed Certificate for presentation to a Long Serving Murwillumbah Hospital Medical Officer by the Board Chair at the next Board Meeting to be held at The Tweed Hospital on 3 April, 2013**

Mr Crawford advised that framed Certificates of Service will be prepared by Sue Walker, Public Relations and Media Co-ordinator, at the appropriate time to recognise the contribution of two long serving Murwillumbah Hospital Visiting Medical Officers who are retiring.

- 4.12 Mr Crawford is to request that Mr Jones meet with Mr Marshall and Ms Bridgett prior to the next Board Meeting to brief them on the Coraki Urgent Care Centre (UCC) and to submit a Brief assessing the effectiveness of the Coraki UCC and make a recommendation about its future to the 6 March 2013 Board Meeting.**

Following considerable discussion, the Board supported the UCC remaining open four hours per day for four days per week and changing its name to the Community Care Centre (CCC) and continuing to be evaluated, as a pilot for a further three months. Additionally Dr Craig is to be advised that she is only required to attend the newly named CCC for four hours per week, which could be for two hours on two days or four hours on one day. Mr Crawford advised that a further report from Mr Jones will then be provided to the Board following the completion of the trial of the CCC in around three months.

Mr Crawford advised that he will also request Mr Jones to consider if it would be beneficial for some Community and/or Allied Health Staff to be in attendance at the CCC on some days.

The Chair requested that the Agenda for the meeting between the NSW LHD Board and the Medicare Local NSW North Coast include discussion about the Coraki HealthOne Service.

The Chair requested that Ms Bridgett, Mr Marshall and Mr Jones arrange to meet with Dr Craig to discuss the new arrangements for the CCC.

Mr Crawford advised that he will prepare a draft Media Release advising of the new arrangements for the CCC, which will be released following the meeting between Dr Craig by Ms Bridgett, Mr Marshall and Mr Jones.

Action:

Mr Crawford is to advise Mr Wayne Jones, that the Board supported the UCC remaining open four hours per day and changing its name to Community Care Centre (CCC) and continuing to operate for a further three months and that Dr Craig is to be advised that she is only required to attend the newly named CCC for four hours per week, which could be for two hours on two days or four hours on one day. Mr Crawford is to request that Mr Jones consider if it would

be beneficial for some Community and/or Allied Health Staff to attend the CCC.

Mr Jones is to provide a report to the Board following the three month trial of the new CCC.

Ms Bridgett, Mr Marshall and Mr Jones are to arrange to meet with Dr Craig to discuss the new arrangements for the CCC.

Mr Crawford is to prepare a draft Media Release advising the Community of the new arrangements for the CCC.

4.13 Mr Spriggs is to arrange a further Meeting of the Work Health and Safety Working Group to develop a recommended document, which is to be presented to the next Board Meeting in the form of a response to the draft Ministry of Health Work Health and Safety Guidelines by the end of February, 2013.

Mr Spriggs tabled a draft letter to Ms Karen Crawshaw, Deputy Director-General, Governance, Workforce and Corporate, MOH in response to the Draft Workforce Health and Safety Guidelines for the Board's consideration.

Mr Crawford advised that he has scheduled a meeting with Yvette Bowen and Katie Willey to identify a suite of indicators, which will be submitted to the Workforce Development Committee for review and then to the Health Care Quality and Finance and Performance Committees for consideration, prior to their being submitted to the Board for approval.

Mr Frazer supported the draft letter to Ms Crawshaw, MOH, noting that there may be a need for discussion with the MOH of issues for which the LHD may need the MOH's assistance from time to time.

Mr Frazer also noted that there were parts of the Guidelines where Yvette Bowen is to come back to the Board with a report to advise how the NNSW LHD is meeting its obligations as identified in the Guidelines, so the Board can be satisfied that it is meeting all of its obligations. Chris Crawford advised that these obligations will be discussed at the meeting he has scheduled with Ms Bowen and Ms Willey.

The Board endorsed the draft letter to Ms Crawshaw, MOH for the Board Chair to sign and forward to Ms Crawshaw.

4.14 Mr Crawford is to arrange for Ms Symes, Health Service Functional Area Coordinator, to attend the 1 May 2013 Board Meeting scheduled to be held at The Tweed Hospital to provide a Briefing on the NNSW LHD major disaster and disease events preparedness for the information of Board Members.

The Board noted the memorandum from Mr Crawford, Chief Executive to Ms Annette Symes, Executive Director of Nursing and Midwifery advising that the Board has requested that she attend the 1 May 2013 Board Meeting to be held at The Tweed Hospital to provide a briefing on NNSW LHD preparedness for major disaster and

infectious diseases situations and the role of the Health Services Functional Co-ordinator (HSFAC) in co-ordinating the LHD's response in these circumstances.

Mr Crawford advised that Ms Symes will provide her Briefing to the Board during the Lunch period from 1pm, prior to the Board Meeting commencing.

4.15 Mr Crawford is to refer the issue of Work Health and Safety reporting and risk updates to the NNSW LHD Executive and the Work Health and Safety team for consultation with a recommended document to be presented to a future Finance and Performance Committee Meeting.

Mr Crawford advised this action overlaps with Item 4.13. Mr Crawford indicated that he expects to be able to submit a suite of indicators being prepared by Ms Bowen and Ms Willey to the 26 March 2013 Workforce Development Committee Meeting, and then to the April 2013 Health Care Quality and Finance and Performance Committee Meetings as a draft for comment document.

4.16 Mr Crawford is to write a letter to the Chair of the National Medicare Local Board and the Chair of the North Coast NSW Medicare Local Board, Dr Tony Lembke to invite Members from the Medicare Local Board to meet with Members of the NNSW LHD Board, which meeting will include a presentation from the two Chief Executives.

The Board noted the letters to the Chair of the National Medicare Local Board and the Chair of the North Coast Medicare Local Board, Dr Tony Lembke inviting Members from the Medicare Local Board to meet with Members of the NNSW LHD Board, which meeting will include a presentation from the two Chief Executives.

Mr Spriggs advised that to date a response has not been received from either the Chair of the National Medicare Local Board or the Chair of the North Coast Medicare Local Board. Mr Spriggs advised that he will follow up with both organisations to elicit their response.

Action:

Mr Spriggs is to follow up to elicit responses to the letters to the Chair of the National Medicare Local Board and the Chair of the North Coast Medicare Local Board, Dr Tony Lembke inviting Members from the North Coast NSW Medicare Local Board to meet with Members of the NNSW LHD Board and provide feedback to the 3 April 2013 Board Meeting.

4.17 Mr Spriggs is to refresh the invitation by writing a letter for the Chief Executive's signature to arrange a Meeting between the NNSW LHD Board and the Gold Coast District Board to discuss alignment of the strategic objectives of the LHDs with a suggestion to hold the joint Meeting at The Tweed Hospital.

The Board noted the letter to Mr Ian Langdon, Chair, Gold Coast Hospital and Health Board, extending an invitation to arrange a Meeting between the NNSW LHD Board and the Gold Coast District Board to discuss alignment of the strategic objectives of the LHDs with a suggestion to hold the Meeting at The Tweed Hospital.

Mr Crawford reported that a response has been received from the Gold Coast District Board with a suggestion that the meeting is held on 1 May 2013 in the morning at the new Gold Coast University Hospital with a viewing of the new Hospital to be undertaken following the meeting. Mr Crawford noted that the NNSW LHD Board is scheduled to meet at The Tweed Hospital on 1 May 2013 at 1.30pm and the meeting with the Gold Coast District Board could conveniently be held at 9.00am.

Mr Crawford advised that information will be provided to the NNSW LHD Board Members on the specific arrangements for the meeting with the Gold Coast District Board following confirmation of final arrangements.

4.18 Ms Rosie Kew is to provide feedback in relation to future Accreditation processes to the 6 March 2013 Board Meeting

Mr Crawford advised that work is currently underway to prepare for a Periodic Review of the Richmond Network of the Richmond Clarence Health Service Group and a follow-up to a Periodic Review Accreditation Survey undertaken last year of the Tweed Byron Health Service Group, on two specific High Priority recommendations, which will occur shortly. Mr Crawford noted that Grafton Base Hospital and the other Clarence Valley Health Services will undergo a Survey in October 2013 against the ten new National Standards.

4.19 Concerns from the NNSW LHD Board are to be referred to the Clinical Council for discussion about the lack of availability of pregnancy termination procedures being provided at Lismore Base and Coffs Harbour Base Hospitals.

Mr Spriggs reported that the issue of the lack of available termination procedures at Lismore Base and Coffs Harbour Base Hospitals has been referred to the NNSW LHD Clinical Council and will be placed on the next Clinical Council Meeting Agenda for discussion.

4.20 Mr Crawford is to provide a copy of the response to Stuart Riley's letter received from Nigel Lyons, Chief Executive, Agency for Clinical Innovation (ACI) regarding the Rural Health Network to the 6 March 2013 Board Meeting for information.

Mr Crawford indicated that Dr Lyons, Chief Executive, ACI has indicated that he believes that there is no duplication between the work being undertaken by LHDs and the work that will be undertaken by the ACI Rural Health Network, and this advice is supported by an examination of the Rural Health Network Terms of Reference.

Ms Bridgett suggested that in the Draft Terms of Reference under 4 Functions second dot point the inclusion of "To provide a mechanism for examination of clinical variation and promotion of best practice and identification of research opportunities."

Mr Crawford is to forward a letter to Dr Nigel Lyons, ACI advising of the proposed inclusion in the Draft Terms of Reference for ACI Rural Health Network under Item 4 Functions.

Action:

Mr Crawford is to forward a letter to Dr Nigel Lyons, ACI advising of the proposed inclusion in the Draft Terms of Reference for ACI Rural Health Network under Item 4 Functions second dot point of "To provide a mechanism for examination of clinical variation and promotion of best practice and identification research opportunities."

4.21 Mr Crawford is to make contact with the Ministry of Health to seek more detailed information on the impact on LHDs of the National Disability Strategy NSW Implementation Plan and provide feedback on this matter to a future Board Meeting.

The Chair advised that he will be writing to the Chair of the Council of Board Chairs requesting the inclusion on the Council of Chairs Agenda of a briefing on the impact on LHDs of the National Disability Insurance Scheme (NDIS) NSW Implementation Plan.

The Chair noted that the implementation of the NDIS will include funding and suggested that it may provide opportunities for LHDs as substantial care packages will be provided as part of the rollout of the NDIS.

Dr Page asked if the Chair could make enquiries about whether post-polio opportunities will be covered by the NDIS.

Ms Crayden commented that there is an age limit for being covered by the NDIS and the post-polio group may be covered by other arrangements. Ms Crayden stated that LHDs will need to promote themselves as providing a service to individuals, as this is where the funding will be provided, the objective is a personalisation of services.

The Chair noted that the disability associated with Mental Health Services will be covered by the NDIS.

Mr Crawford advised that the rollout of the NDIS will commence in the Newcastle and Hunter New England LHD in the first instance.

4.22 Dr Pezzutti is to raise the issue of the National Disability Strategy NSW Implementation Plan and its likely impact on Local Health Districts with Dr Creagan for inclusion on the Agenda of the next Council of Board Chairs Meeting Agenda for consideration

The Chair advised that as reported in Item 4.21 he will be requesting that the impact of the NDIS Implementation Plan on LHDs is placed on the Agenda for the next meeting of the Council of Board Chairs.

Mr Crawford noted that the Chair will also raise a number of other issues for consideration at the Council of Board Chairs Meeting, including Activity Based Funding (ABF), changes to Work Health and Safety Legislation, Quality Indicators being integrated with ABF and a copy of the letter he will give to the Chair of the

Council of Board Chairs, Dr Creagan raising these issues, will be included in the 3 April 2013 Board Meeting Agenda for the information of the Board.

Action:

A copy of the letter to Dr Pat Creagan, Chair, Council of Board Chairs raising a number of issues for inclusion on the next Council of Board Chairs Meeting Agenda is to be circulated with the 3 April 2013 Board Agenda for noting.

5. NSW LHD Board Resolution & Decision Register

Updated from 30 January 2013 Board Meeting for noting.

Noted

5.1 Additions to Register Items 85, 96, 113, 121, 148, 169, 170, 184, 185 and 197 covered in Item 4 Business Arising.

Noted

5.2 New Register Items 202 to 209 covered in Item 4 Business Arising.

Noted

6. Minutes – Governance Committee:

6.1 Finance & Performance Committee

The unconfirmed minutes of the NSW LHD Finance and Performance Committee Meeting held on 27 February 2013 were noted by the Board

Action:

Mr Crawford is to follow-up with Mr McGuigan to ascertain if CT Scans and Pathology is included in the Activity Based Funding ED treatment costs and provide feedback to the Board.

6.2 Health Care Quality Committee

6.2.1 The Minutes of the Special Health Care Quality Committee Meeting held on 29 January 2013 are circulated for noting

The Minutes of the Special Health Care Quality Committee Meeting held on 29 January 2013 were noted by the Board.

6.2.2 The Minutes of the Health Care Quality Committee held on 12 February 2013 are circulated for noting.

The Minutes of the Health Care Quality Committee Meeting held on 12 February 2013 were noted by the Board.

6.3 Medical and Dental Advisory Appointments Committee (MDAAC)

The Minutes of the MDAAC Committee held on 14 February 2013 were noted by the Board.

6.4 Health Services Development Committee

The Minutes of the Health Services Development Committee Meeting held on 26 February 2013 will be submitted to the 3 April 2013 Board Meeting for noting.

6.5 Audit and Risk Committee

The Board noted that the next meeting of the Audit and Risk Committee is scheduled for 7 March 2013.

6.6 NNSW LHD Clinical Council

The unconfirmed Minutes of the NNSW LHD Clinical Council meeting held 12 February 2013 were noted by the Board.

6.7 Community Engagement Advisory Council (CEAC)

The unconfirmed Minutes of the NNSW LHD CEAC meeting held 17 December 2012 were noted by the Board.

6.8 Medical Staff Executive Council (MSEC)

The Minutes of the NNSW LHD Medical Staff Executive Council Meeting held 14 February 2013 were noted by the Board.

7. General Business:

7.1 NNSW LHD Health Care Services Plan Scope of Plan and Terms of Reference

The Chair nominated Dr Joe Ogg as a Board Member representative on the Health Care Services Plan Steering Committee and Dr Tyson as the alternative representative.

Dr Ogg accepted the nomination and Dr Tyson accepted the nomination as alternative representative on the NNSW LHD Health Care Services Plan Steering Committee.

Moved: Dr B Pezzutti
Seconded: Ms Leone Crayden
CARRIED

Dr Sue Page indicated that she is available to attend the Health Care Services Plan Steering Committee Meetings should Dr Ogg or Dr Tyson not be available to attend any of the them.

7.2 Brief on Coraki Urgent Care Centre

Refer Item 4.13

7.3 Draft Terms of Reference for the Health, Education, Workforce and Research Forum

Mr Spriggs advised that he is waiting on additional information from Dr Hutton for the Terms of Reference for the Health, Education, Workforce and Research Forum. Mr Spriggs advised that he will submit the Draft Terms of Reference for the Health, Education, Workforce and Research Forum to the 3 April 2013 Board Meeting for consideration.

The Chair advised that Dr Ogg had indicated his interest in the educational component of the Forum and as the LHD is now developing a major simulation centre and process within the LHD, he is keen to be involved as his skills and training will provide valuable input into the Health, Education, Workforce and Research Forum discussions. The Chair indicated that he has requested Mr Crawford to consider whether education could be separated out from the research component of the Forum, as SCU had concerns relating to competition in research. The Chair advised that if the education components can be separated, then nominations would be sought, one for education and one for research, which he believed should address the SCU's concerns.

Mr Crawford advised that he would contact the SCU Vice-Chancellor to discuss this proposal and report back to the 3 April 2013 Board Meeting on these discussions.

Action:

Mr Crawford is to contact the Southern Cross University (SCU) Vice-Chancellor to propose that education could be separated out of the research component of the Health, Education, Workforce and Research Forum, to address the SCU concerns about a potential conflict of interest, relating to competition for research funding and between SCU and Bond and Griffith Universities report back to the 3 April 2013 Board Meeting on the outcome of the discussion with the Vice-Chancellor on this matter.

8. Chief Executive's Report

Mr Crawford referred to the issues that were covered in his report to the Board, which included the NSW State Health Plan Think Tank, Seclusion and Constraint in the Lismore Adult Mental Health Unit, Australia Day Weekend Storms/Flooding, Clinical Safety Systems, Bonalbo Hospital, NEAT and NEST Performance, Performance Rating, Budget Result, 2013/14 Budget Build Up, Coraki Urgent Care Centre, Patient Story, Justice and Forensic Mental Health Network Strategic Plan, Ballina Hospital Upgrade, Clarence Valley Mental Health Pamphlet, Agency for Clinical Innovation Work Priorities, Pottsville HealthOne, National Disability Program, Preparations for Winter, NNSW LHD Critical Care Committee, Mid North Coast Community Peritoneal and Home Dialysis Patients, NNSW LHD Asset Strategic Plan, Nurse Practitioners, Medicare Local NSW North Coast Strategic Directions and Service Design, Information Communications and Technology (CT) Service Audit of 2011/12 Budget Performance, Bundled Services, Clinician Engagement and Provision of Pre-Packaged Meals to GBH Patients.

The Board endorsed the Chief Executive's Report.

9. For Information:

9.1 Letter from Ken Whelan, MOH, dated 6 February 2013 concerning Clinical Safety Systems. and NNSW LHD Response dated 25 February 2013

The Board noted the letter from Ken Whelan, MOH, dated 6 February 2013 requesting information on Clinical Safety Systems.

9.2 NNSW LHD Response dated 25 February 2013 to Ken Whelan, MOH, concerning Clinical Safety Systems

The Board noted the comprehensive NNSW LHD response to Ken Whelan, MOH, letter of 6 February 2013 that provided a summary of NNSW LHD governance of clinical safety structures and systems within the LHD.

The Chair advised the Electronic Medical Record services data collection and administrative aspects of patient treatment, however it does not service the need for a clinical audit and there is a need for increased clinical tools, such as an Anaesthetist Record that will store information electronically and allow auditing of specific data. The Board specifically noted the comments on Page 12 concerning the financial sustainability of the LHD and the importance in the ABF context of the efficient allocation of the funding received.

9.3 Brief on information on the enactment of Tobacco Control Legislation By-Laws in NNSW LHD

The Board endorsed the recommendation made by the Executive to await further advice when the Model By Laws are made available by the MOH concerning the enactment of tobacco control legislation By-Laws in NNSW LHD.

10. Business Without Notice

Dr Tyson suggested that a Motion of Condolence be passed in relation to Dr Michael King who was the Medical Superintendent of GBH between 1994 – 1997, who died tragically on 22 February 2013. Dr Tyson moved that a letter of condolence be forwarded to Dr King's wife, Rajenda Lamont, who is a Diabetic Educator in Grafton.

Moved: Dr Alan Tyson
Seconded: Mr Malcolm Marshall
CARRIED

Action:

The Board Chair is to forward a Letter of Condolence to Ms Rajenda Lamont, wife of the late Dr Michael King, former GBH Medical Superintendent.

11. Correspondence In:

11.1 Schedule of correspondence received by the Board Chair for noting – documents to be tabled.

Nil

11.2 Letter from Mr Michael McNamara, Convenor, Lock The Tweed concerning health impacts of Coal Seam Gas exploration

The Chair suggested that it may be beneficial to collect information over a two or three month period on presentations to TTH, LBH and GBH EDs, which could be undertaken retrospectively on potential health impacts that relate to Coal Seam Gas exploration and production. The Chair also indicated that if data is able to be obtained, a further response could be forwarded to Mr McNamara providing more detailed information.

Mr Crawford advised that he will consider this suggestion and provide feedback to the Board in due course.

Action:

Mr Crawford is to consider the logistics of collecting information over a two or three month period on presentations to TTH, LBH and GBH EDs which could be undertaken retrospectively on potential health impacts that relate to Coal Seam Gas exploration and production and provide advice to the 3 April 2013 Board Meeting.

12. Correspondence Out:

12.1 Letter to Mr Barry Shepherd, Chair NNSW LHD Audit and Risk Committee seeing advice on attendance of Board Members at the Audit and Risk Committee Meeting as Observers

Noted

12.2 Letter to Ms Deborah Oong, MOH concerning Board Deputy Chair and enclosing Instrument of Appointment

Noted

12.3 Letter of response to Mr Michael McNamara, Convenor Lock The Tweed dated 26 February 2013 concerning Coal Seam Gas exploration

Noted

12.4 Letter from the Board Chair to NNSW LHD Board Members providing a list of Board Committee representatives

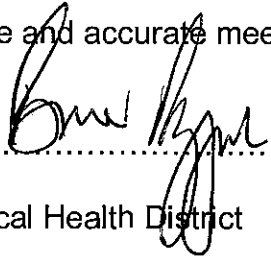
Noted

**13. Next Meeting: Special Board Strategic Budget Meeting
Wednesday 20 March 2013 1.30 – 5.00 pm Ground Floor Meeting Room,
Crawford House, Hunter Street, Lismore**

Wednesday 3 April 2013 1.30 – 5.00pm Ground Floor Meeting Room, Crawford House, Hunter Street, Lismore

There being no further official business, the Chair declared the meeting closed at 5.18pm

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

Signed 
Dr Brian Pezzutti
Chair, Northern NSW Local Health District

Date 9.5.13