

Minutes of the Hunter New England Local Health District Board

Eleventh Meeting

27th June 2012

Venue: Manning Hospital

Present

Associate Professor Lyn Fragar, Dr Felicity Barr, Professor Trevor Waring, Mrs Janelle Speed, Mr Ken White, Dr Helen Belcher, Mr Paul Henry, Dr Bruce Bastian, Ms Helen Staines Mr Fergus Fitzsimons, Dr Ian Kamerman.

[Board members Ms Helen Staines, Dr Ian Kamerman, My Fergus Fitzsimons and Mr Paul Henry left the meeting before Items 8;8;10 and 11 were considered.]

Apologies

Professor Nik Bogduk

In Attendance

Mr Michael DiRienzo, Mr Todd McEwan, Ms Carina Bates, Dr Murray Hyde-Page and Ms Desiree Chymiak. Mr Stewart Leeman joined the meeting for items 4.5 and 6.1

Order of business: 1- 5.8; 6.1-6.6; 5.9; 8.1-8.2; 5.10; 5.11;9-10.1.

TOUR OF THE FACILITY

Board members were provided with a tour of the Manning Hospital led by Ms Roz Everingham. The Chair THANKED Ms Roz Everingham and staff for the hospitality provided.

MEETING WITH THE LOCAL HEALTH COMMITTEE

The Board were joined by members of the Local Health Committee from both Manning and Forster, The Local Member of Parliament, the Mayor of Taree (representing the local Mayors) and discussed key issues and priorities.

Matters discussed included:

- Local representatives expressed their appreciation and thanked the Board for meeting at Manning.
- The group thanked Ms Roz Everingham for her time as acting General Manager.
- The Local Health Committee is known as the *Manning Health Committee* rather than the Manning Hospital Local Health Committee.

The Manning Health Committee is happy with the direction that the Board is taking local committees. Members are looking forward to the challenge of the local committees and the role they will be taking in the future.

The Committee has reviewed services that the hospital provide and has progressively worked through every part of the hospital.

Actively involved in the issue of oncology and patients having to have to travel. Elderly patients cannot travel to Newcastle or Port Macquarie for treatment and this is a burden on the patient and their families.

Community transport and dialysis patients needs to be added to the clinical services plan. Would like the Executive to consider capital recurrent funding opportunities.

- The *Forster Committee* – is looking forward to being a more active committee. members have created a local services directory which has been well received. Also looking forward to direction from the Board. Members are very active and highly committed to the Forster community.

Helicopter transfer of patients to John Hunter Hospital – would like to see patients transferred directly to John Hunter Hospital via helicopter rather than them being transported via ambulance from Manning to Bulahdelah.

- Currently no Aboriginal members on the Local Health Committees.
- Both committees would like to engage with young people.
- There was discussion over the need for MRI services at Manning Hospital.

BUSINESS OF THE MEETING

1. Welcome and Apologies, Acknowledgement of Country

The Chair, Associate Professor Lyn Fragar opened the meeting at 11.00am and welcomed those present.

The Chair ACKNOWLEDGED the traditional owners of the land on which the meeting was held and elders past and present.

2. Declarations of Conflict of Interest

The Board NOTED the declaration of Ms Helen Belcher on agenda item 6.1 Strategic Asset Plan.

The Board NOTED the declaration of Dr Ian Kamerman on agenda item 5.2 around the Werris Creek MPS and his proposal for a licence for GP rooms.

3. Minutes of the Previous Meeting

The minutes from the meeting held on the 30th May 2012 had been circulated. The minutes were ADOPTED by the Board as a true and accurate record.

The minutes will be published on the Board section of the Hunter New England Health District website.

ACTION BY: Secretariat

4. Business Arising from Previous Meetings

4.1 Action Sheet – report on actions taken

The Board NOTED progress with actions agreed to be taken at previous meetings.

4.2 MRI Manning Status Report

The Board had been provided with a brief from Mr Todd McEwan. There has been continued local clinician and political interest at Manning Rural Referral Hospital for an agreement to pursue an MRI scanner with Mid North Coast Diagnostics.

It was SUGGESTED that the option of a Public Private Partnership should be explored along with private sector opportunities.

It was AGREED that the Mr Michael DiRienzo and Mr Todd McEwan should hold discussions with relevant parties, and explore the option of a Public Private Partnership.

ACTION BY: Mr Michael DiRienzo and Todd McEwan

4.3 Communication Plan

The Board was provided with a brief from Ms Carina Bates. The NSW Minister of Health Jillian Skinner had written to the Chair in November 2011 to outline her expectations of District Boards and Board Chairs, including development of communication strategies and plans. The draft framework was discussed by the Board with the following recommendations:

- A Communication Plan should be developed that includes a statement of vision and objectives. It was suggested that Hunter New England District should see ourselves as leaders in communication, and 'excellence' should be built into the communication plan
- The plan should include communication with community and clinicians
- Need to include goals and targets against which to measure achievements.

It was AGREED that a communication plan on how the organisation as a whole plan to communicate more effectively should be developed. A draft of the strategic approach and guidelines should be developed by the July Board meeting.

ACTION BY: Ms Carina Bates with Dr Felicity Barr

4.4 Birthrate Plus

The Board was provided with a copy of a letter which was sent by the Chief Executive to Mr John Roach and the Ministry of Health. The letter outlined issues around the shortfall in funding required to achieve the FTE levels under the award.

The Board NOTED the information in the letter and the action taken.

4.5 NSW Health Minor Capital Works Requirements

The Board was provided with a brief from Mr Stewart Leeman who had joined the meeting for the discussion. The brief identified the system-wide issues and scope of requirements for minor capital works.

It was AGREED that the District should make submission to the Ministry of Health indicating that the District cannot meet its obligations for an ongoing effective Minor Works program through the current funding process, and recommending that a funded rolling Minor Works program be established.

ACTION BY: Mr Michael DiRienzo

5. STANDING ITEMS

5.1 Board Chair Report

The Chair advised that she would provide a report during item 9 Relating to Board evaluation and the Board members' Forum.

5.2 Chief Executive's Report

The Chief Executive report had been circulated to members in the business papers. The Board NOTED the report that summarised key current issues for the District. These included:

- John Hunter Hospital campus – sale of land to Healthscope with proceeds from the sale earmarked for car parking improvements.
- Hunter Water Land – Mater Health Precinct Waratah. Discussions have occurred between Hunter New England Health and Hunter Water Corporation to purchase land adjacent to the Mater Hospital. Hunter New England Health have received approval from the Ministry of Health to purchase the land and contracts are expected to exchange prior to June 30th.
- Werris Creek Multi Purpose Service was officially handed over to Hunter New England Local Health District on the 13th June 2012. The Board will be invited to attend the official opening once a date has been established.
- Workforce – Ernst and Young have been engaged to undertake a Statewide review to identify and evaluate feasible workforce productivity improvement opportunities across clinical medical areas.

The Board NOTED the Chief Executive's report.

5.3 Finance and Performance Report

A brief had been provided to the Board by Mr Mark Jeffrey which summarised the financial performance to May 2012 and activity performance to April 2012.

The report was discussed and NOTED by the Board.

5.4 Finance and Performance Committee

The draft minutes from the 25th May 2012 had been circulated to the Board with the business papers for information.

The minutes were NOTED by the Board.

5.5 Health Care Quality Committee

The draft minutes from the 14th June 2012 had been circulated to the Board with the business papers for information. Dr Helen Belcher also tabled a report from the meeting held on the 14th June 2012.

The minutes and report were NOTED by the Board.

5.6 Audit and Risk Management Committee

No minutes for this meeting. Dr Felicity Barr gave a verbal report of the meeting of 19 June, noting the significant rise in audit fees resulting from the Auditor-General's office taking on direct audit of HNELHD. Dr Barr also reported that the Board's comments following the presentation on risk management at its last meeting had been discussed. The committee requested changes to reporting requirements to focus more on the management of risks than on the process of reporting risk.

5.7 Medical and Dental Appointments Advisory Committee

A brief was provided to the Board by Ms Glenda Dingwall. Professor Trevor Waring also tabled a report on the committee. The Medical and Dental Appointments Advisory Committee charter has recently been reviewed to attempt to align with the new by-laws.

The reports were NOTED by the Board.

The Board ENDORSED the revised charter.

It was AGREED that this committee should now report quarterly only to the Board.

5.8 Clinical Council

No minutes for this meeting.

5.9 Medical Staff Executive Council Report

A report from Professor Nik Bogduk was tabled at the meeting and discussed.

The Board NOTED the report.

5.10 Members Reports

Nil for this meeting.

5.11 Mental Health Sub-Committee

Professor Trevor Waring reported the following verbally to the Board:

- The Committee has met on three occasions, twice via teleconference and one face to face meeting.
- A set of questions to mental health management was developed around issues of concern which have been answered.

LUNCH WITH THE CLINICIANS

A number of clinicians joined the Board and Executive for lunch. Issues raised by clinicians with Board members and the Executive at the lunch included:

Community Health

- Has been working on benchmarking numbers with respiratory and cardio program – readmission rates are lower than other states.
- Education programs have shown a shift in improvement in patients' conditions.
- Palliative deaths at home – exceeding state rates.
- Universal home visiting rates are lower than the state.
- There is an increase in complexity of patients coming through the system.
- Aboriginal infant maternity strategy has been implemented and working well.
- Discharge planning – now using an electronic spreadsheet which is much more efficient.
- There are some gaps in allied health services
- Dietitian and pharmacy services – not enough resources.

Mental Health

- Integrating services is working very well - patients do not have to tell their story numerous times.
- Discharge summaries out within 24 hours with 90% followed up within 7 days, aim to reach 100%.
- Assessment in emergency department by community staff has reduced numbers of admissions.
- Evaluation of clients (surveys) has occurred in the past – ongoing project to measure satisfaction rates.
- Challenges – overcrowding of staff, CHIME , electronic systems take time away from care of patients.
- Internet speed is an issue.
- Some patients are transferred to Manning from out of area for ECT's (eg from Tamworth) – patients are away from their families, very long for patients. No community accommodation or low cost accommodation in the town for families.

Social Work

- Good relationship with community health
- Need an Aboriginal community social worker.

Pharmacy

- Supply pharmacy services to the community which takes time away from the hospital, no cost to the hospital.
- Gloucester has no pharmacy community service, head pharmacy at Manning provides advice to Gloucester currently. Need to look how we continue to structure this system.
- Lost budget for cleaning to Health Support Services.

Medical

- Intensive care services have been increased, very positive.
- Some machines ie stress machine needs replacing.
- Intensive care – focus on the last 12 months has been reducing morbidity care, very proud of this .
- Two new staff specialists have started in the last month.
- Need more registrars as junior medical staff do not have enough experience.
- Setting up clinical streams and networks has been positive.
- Positive that the clinical services plan is being done.

Nursing

- Working on a lot of skills development
- Risk of losing 50% of workforce in 5-10 years time due to retirements.
- High talent of nursing staff at Manning, getting a lot of young nurses.

6. NEW BUSINESS

6.1 Strategic Asset Plan

A brief was provided by Mr Stewart Leeman. The District is required to submit its annual review of the Asset Strategic Plan to the Ministry of Health by the 30th June 2012.

The Board reviewed the schedule of initiatives and AGREED that a consultative process must occur with clinicians and community. The Board was supportive of the plan and AUTHORISED submission of the Asset Strategic Plan and Minor Works Report to the Ministry of Health.

6.2 Inappropriate and Prohibited Email Usage

A brief had been provided by Mr Kevin O'Malley. The Local Health District is undertaking investigations of inappropriate and prohibited email usage pertaining to approximately 20 staff in the Hunter New England region. This is an ongoing investigation. The Board NOTED the information.

6.3 Men's Health Activities

A brief had been provided by Mr Kim Nguyen. A NSW Men's Health Plan was developed by NSW Health to guide planning and delivery of health promotion programs and services for men living in New South Wales. The plan aims to guide planning and providing health care, health promotion and information that appropriately address the health needs of men to improve their health outcomes.

The Board NOTED the information, and suggested that the Australian Centre for Agricultural Health and Safety be involved.

ACTION: Mr Kim Nguyen

6.4 Visit from the Ministry of Health Director General and Deputy Director General

A brief had been provided by Ms Carina Bates. The NSW Ministry of Health Director General Mary Foley and Deputy Director General of Strategy and Resources Dr Rohan Hammet visited Hunter New England Local Health District on the 8th June 2012. The visit included a brief tour of John Hunter and John Hunter Children's Hospitals and a session with the Hunter New England Health Executive Leadership Team.

The Board NOTED the information provided.

6.5 Budget

A brief had been provided by Mr Michael DiRienzo. The NSW Health Budget was handed down on the 12th June 2012. NSW has budgeted a deficit of \$824 million for 2012/13 in the context of a renewed global economic slow down, weaker confidence and a significant deterioration of GST revenue. This is an increase of \$487 million from the estimated budget deficit of \$337 million in 2011/12.

The Board NOTED the information provided.

6.6 Activity Based Funding Targets for 2012/13

A brief had been provided by Mr Grantly Hunt. Hunter New England Local Health District has submitted revised activity projections for 2012/13 based on local modelling and discussion. The Ministry has responded with its final determination of activity to be included in the Service Agreement.

The Board NOTED the information provided.

7. Correspondence

Board members had been circulated with correspondence.
The correspondence was NOTED by the Board.

8. HNE Health Policy

Nil for this meeting.

9. Board "In Camera" Session

The Board moved into 'in camera' session with Board members and the Chief Executive present. Matters discussed included:

9.1 Board Evaluation

It was AGREED that a meeting to consider the Annual Board Evaluation outcomes be held on the afternoon prior to the August meeting in Newcastle.

9.2 Meeting feedback

The meeting feedback form will be amended following determination of Board goals for the next year.

9.3 Reflections on the Board members' Forum

Members reported their feedback on sessions in the Forum.

9.4 Correspondence from the Director General regarding Chief Executive remuneration processes.

The correspondence was discussed and NOTED.

10. Next Meeting

The next Board meeting will be held on Wednesday 25th July 2012 at Gunnedah.

11. Meeting Evaluation

Members were requested to complete a meeting feedback on the SurveyMonkey link to be circulated by the Chair after the meeting.

ACTION BY: All members and meeting participants

The meeting closed at 4.00pm