

Minutes of the Hunter New England Local Health District Board

Eighty Fourth Meeting

19th and 20th March 2019

**Venue: Boggabri Multi-Purpose Service (MPS)
and Narrabri Hospital**

Present

Associate Professor Lyn Fragar (Chair), Dr Helen Belcher, Mrs Barbara Clark, Ms Lyn Raines, Mr Peter Johnston, Dr Patrick Farrell, Dr Felicity Barr, Mr Fergus Fitzsimons, Dr Ian Kamerman, Mrs Janelle Speed, Mr Ben Wilkins and Dr Stephen Pryde

Apologies

Dr Martin Cohen and Dr Stephen Oakley (Medical Staff Executive Council)

In Attendance

Mr Michael DiRienzo, Ms Susan Heyman and Ms Dianne Kershaw

Order of Business: 1.1 – 9.3

TUESDAY 19th MARCH 2019 COMMENCING AT 2.00PM

TOUR OF THE BOGGABRI MPS

The Board was given a tour of the Boggabri Multi-Purpose Service, led by Elizabeth Worboys, Health Services Manager.

AFTERNOON TEA WITH BOGGABRI MPS AND BOGGABRI HEALTH COMMITTEE

The Board was joined by the Boggabri MPS staff and Boggabri Health Committee for afternoon tea.

Discussion focussed on How Patient Safety and Quality is monitored and in practice in the Health Service. The following were NOTED:

- The “Living Well in the MPS Collaborative” program has provided excellent outcomes for the residents; it has been very well accepted and it was noted the vast improvement in meals and dining room experience for the residents since implementation.
- Uniform documentation for care plans and rounding for residents.
- A camera to provide telehealth oral health services for the residents has been purchased by the Hospital Auxiliary.
- It was acknowledged that there was a marked improvement and flexibility with the meals with a 4 week rotating menu and choice on the day being implemented in April.
- There has been a decrease in falls and pressure injury in the MPS.
- The current model for provision of medical services is a good sustainable model.
- Signage in some of the areas of the facility needs attention.
- Rounding with the residents was very well accepted and data was collected from residents and carers.
- Information packs for patients and family have been developed and it was recommended that the Health Service Manager to ensure that the booklet fits with the Health Literacy lens.

Other matters raised were NOTED:

- The Local Health Committee is building up again there had been a suggestion that the time of the meetings would be changed to catering for those on the land with other commitments during the day.
- The Health Service has developed a Facebook page which they envisage will be a good source of information for prospective new members.
- It was noted that there is a request for the future to reconfigure the two sections of the building to provide a larger dining area for residents.

The Chair THANKED the Health Committee members and Boggabri MPS staff for their commitment and excellent work for the people of Boggabri.

BUSINESS OF THE MEETING

PRELIMINARY

1.1 Welcome, Apologies and Acknowledgment of Country

The Chair, Professor Lyn Fragar opened the business meeting at 3:25pm.

The Board Chair ACKNOWLEDGED the traditional owners of the country on which the meeting was held and paid respects to elders past and present.

1.2 Conflicts of Interest

It was NOTED that Ben Wilkins conflict of interest being – *“NHVPA (under Memorandum of Understanding with the HNECC PHN) to provide Digital Health Officer services to community pharmacy in the Newcastle-Hunter Valley, New England and Central Coast region”*

It was NOTED that the Board Secretariat would provide a full register of Board Members “Interests” out of session.

ACTION BY: Board Secretariat

1.3 Adoption of Minutes

The minutes of the meeting held on the 20th February 2019 had been circulated. The minutes were ADOPTED by the Board. The minutes will be published on the Hunter New England Health internet site.

ACTION BY: Board Secretariat

1.4 Action List

Progress on action items was DISCUSSED and NOTED by the Board. Board Secretariat to amend the Action list for 4.1 to read Martin Cohen/Melissa O’Brien, and action for Karen Kelly to include Bariatric clients in the Action.

1.5 Board Chair Report

The Board Chair provided a verbal report.

1.5.1 The Board Chair took time to reflect on the events that took place in Christchurch New Zealand.

It was AGREED that at the next Board meeting in Newcastle that the Chief Executive provide a brief on how HNELHD is placed to handle with such disasters.

ACTION BY: Chief Executive

It was further AGREED that the Chief Executive would ask Liz Grist Director of Nursing & Midwifery to take with her to New Zealand when she visits on 26th March 2019 messages of condolence and support from Hunter New England Health.

ACTION BY: Board Secretariat

1.5.2 Council of Board Chairs Meeting

The Chair reported on three elements of the recent Council of Board Chairs Forum:

1. Leading Better Value Health Care.

It was AGREED that a presentation be given by Phil Way on the progress on Leading Better Value Health Care in HNELHD at the next Board Meeting.

ACTION BY: Board Secretariat

2. Doctor Well-being particular junior doctor’s overtime and rostering. It was AGREED that the Chief Executive would bring to the Board a presentation around the “Doctor Well-Being” in the next 3 to 6 months.

ACTION BY: Board Secretariat

3. EHealth and Cyber Security. The Chief Executive was provided with a checklist provided to Chairs re Cyber security

1.5.3 Professional Development Program for Doctors – held at Nelson’s Bay.

It was AGREED that the Chief Executive would liaise with Annette Solman, Chief Executive, Health Education & Training Institute with regards to how the program could attract more HNE doctors to the event.

1.6 Chief Executive's Report

The Chief Executive's report had been circulated in the business papers. The report included the following:

- Violence Abuse and Neglect Services
- Child Abuse and Sexual Assault Clinical Advice Line (CASACAL)
- Districtwide Close the Gap Forum 2019
- The Royal Commission into Aged Care Services
- Bushfire emergency response in Tingha and Tabulam, NSW
- Election Commitments
- Inverell Hospital Redevelopment Update
- MRI Licences for Tamworth and Manning
- 2019 Graduate Recruitment Program
- Maitland Hospital

The Board DISCUSSED and NOTED the information in the Chief Executive Report.

COMMUNITY – THE PEOPLE WE SERVE

2.1 Community and Consumers Partnership Committee Minutes

There were no papers for this meeting.

2.2 Good Health Committee

The report and minutes from the meeting held on the 19th February 2019 had been distributed in the Board papers. The report was NOTED by the Board.

2.3 Aboriginal Health Committee Meeting

There were no papers for this meeting.

It was AGREED that the Board Chair would attend the next meeting. Next meeting date to be advised.

ACTION BY: Board Secretariat

2.4 New Business

There was no new business relating to COMMUNITY – THE PEOPLE WE SERVE.

2.5 For Information

There was no new information relating to COMMUNITY – THE PEOPLE WE SERVE for this meeting.

SERVICE – THE SERVICE WE PROVIDE

3.1 District Clinical Council Minutes

The report and minutes from the meeting held on the 13th February 2019 had been circulated in the business papers.

3.1.1 The report was NOTED by the Board and the ACTION raised in the Clinical Council Minutes regarding e-maternity briefing from Dr Henry Murray and Dr Pooshan Navathe to Dr Patrick Farrell be followed up.

ACTION BY: Board Secretariat

3.2 Medical Staff Executive Council Report

There were no papers for this meeting.

3.3 New Business

There was no new business relating to THE SERVICE WE PROVIDE for this meeting.

3.4 For Information

There was no new information relating to THE SERVICE WE PROVIDE for this meeting.

SAFETY AND QUALITY – EXCELLENCE – EVERY PATIENT, EVERY TIME

4.1 Health Care Quality Committee Minutes

The report and minutes from the meeting held on the 27th February 2019 had been circulated in the business papers. The report was NOTED by the Board.

4.2 New Business

There was no New Business relating to SAFETY AND QUALITY for this meeting.

4.2.1 Antimicrobial Stewardship Program

It was AGREED that the Antimicrobial Stewardship Program Pharmacist provide a brief regarding the Program outcomes to the Board in next 6 months.

ACTION BY: Board Secretariat

4.2.2 Discharge Summaries

It was AGREED that there needs to be a new approach with regards to Discharge Summaries and the following NOTED:-

- Empowering patients on discharge and handover of care.
- Reviewing the summary of what the GP needs.
- Poor compliance rate of for discharge summaries being ready at discharge
- Medications on discharge
- Mapping of the process and look at opportunities with an Excellence lens.
- Listed on the agenda for the next Health Care Quality Committee meeting.

4.2.3 Governing Body's Attestation Statement under the AHSSQA Scheme.

It was AGREED that Hunter New England Local Health District Board understands and acknowledges submission of this Attestation Statement is a pre-requisite to accreditation of the Organisation using NSQHS Standards under the Scheme and specific Actions in the NSQHS Standards concerning Governance, Leadership and Culture will be further reviewed at any onsite accreditation visits.

It was AGREED that the Chief Executive would provide a briefing to the Board on 90 Day Action Plans and Monthly Accountability Meetings to validate the process and show evidence of this process.

ACTION BY: Board Secretariat

4.3 For Information

There was no new information relating to SAFETY AND QUALITY for this meeting.

RESOURCES – MANAGING OUR SERVICES WELL

5.1 Finance and Performance Report

The Board DISCUSSED and NOTED the Finance and Performance Report.

5.2 Finance and Performance Committee Minutes

The report and minutes of the meeting to be held on the 19th February 2019 had been distributed in the business papers. The report was NOTED by the Board.

5.3 Audit and Risk Management Committee

There were no papers for this meeting.

5.4 Work, Health and Safety Report

The report had been distributed in the business papers. The report was DISCUSSED and NOTED by the Board.

5.5 New Business

There was no new business relating to MANAGING OUR SERVICES WELL for this meeting.

5.6 For Information

There was no new information relating to MANAGING OUR SERVICES WELL for this meeting.

POSITIONING FOR THE FUTURE

6.1 Innovation and Research Report

The report has been distributed in the business papers. The report was DISCUSSED and NOTED by the Board.

6.2 New Business

There was no New Business relating to POSITIONING FOR THE FUTURE for this meeting.

6.3 For Information

There was no new information relating to POSITIONING FOR THE FUTURE for this meeting.

OUR STAFF AND WORKPLACE CULTURE

7.1 Medical and Dental Appointments Advisory Committee

The report and minutes of the meeting held on 26TH February 2019 had been distributed with the business papers. The paper was NOTED by the Board.

7.2 New Business

There was no new business relating to OUR STAFF AND WORKPLACE CULTURE.

7.3 For Information

There was no new information relating to OUR STAFF AND WORKPLACE CULTURE for this meeting.

BOARD DEVELOPMENT

8.1 Board Performance Report

There were no papers for this meeting.

8.2 Board Members Development Report

There were no papers for this meeting.

8.3 New Business

There was no new business relating to BOARD DEVELOPMENT.

8.4 For Information

There was no new information relating to BOARD DEVELOPMENT.

MEETING REVIEW AND FEEDBACK

9.1 Member's issues not covered elsewhere

Deep Dive – presented by Helen Belcher

Domestic Violence Routine Screening (DVRS) is a KPI for Child and Family Health, Mental Health and Drug and Alcohol services as part of the Service Level Agreement with Ministry of Health. Reports are provided quarterly, and the target rate for DVRS for all services is 70%.

The paper was NOTED by the Board.

9.2 Feedback from the Previous Meeting

The feedback report from the February 2019 meeting had been distributed in the business papers.

The paper was NOTED by the Board

WEDNESDAY 20th MARCH 2019 COMMENCING AT 8:30AM

TOUR OF NARRABRI HOSPITAL

The Board was given a tour of Narrabri Hospital was led by David Quirk, Mehi Sector General Manager and Sharon Simpson, Narrabri Health Services Manager.

MORNING TEA WITH NARRABRI HEALTH COMMITTEE

The Board was joined by the Narrabri Health Committee representatives for morning tea.

Community feedback and health matters raised by the Narrabri Health Committee included:

- The Board NOTED how good the clinical areas felt and the excellent engagement with the Aboriginal people through artwork, gardens and design of the building.
- There was discussion re the hospital visitation policy.
- The biggest community concerns for Narrabri and Wee Waa are the Doctor Workforce and doctor fatigue.
 - Concerns raised that Narrabri would be losing services because of the doctor numbers.
 - Discussion took place regarding the Wee Waa doctor's situation and the Local Health Committee members were asked to continue to be a strong advocate for the Health Service.
- Concerns raised that there is a lack of NDIS services within in the community.

The Board CONGRATULATED and THANKED the Committee for its achievements and ongoing work.

LUNCH WITH NARRABRI HOSPITAL CLINICIANS AND STAFF

The Board was joined by the staff and clinicians from Narrabri Hospital over lunch. Staff from several clinical streams at Narrabri Health Service were present:

The following were DISCUSSED and NOTED:

- The Allied Health team appreciate the holistic team approach to services and the good relationships within the teams.
- Jessica Stuart has been accepted to be in the Clinical Leadership Program.
- Ward Safety Huddles are working really well.
- Aboriginal Health staff levels are at 12%, cultural safety awareness programs are recognised as a good way to have a voice and be involved.
- Doctors acknowledge that with the Aboriginal Health staff present it is especially good from a doctors' prospective with much safer and relevant information being provided to Aboriginal patients.

- Telehealth for Mental Health working well.
- The newly graduated nurse program is working very well with an excellent orientation program
- Doctor's workload and mandatory training was noted as an issue and the need for streamlining documentation

It was AGREED that the Director of Workforce will contact HETI regarding the onerous mandatory training for rural doctors. Narrabri case study to be provided as an example.

ACTION BY: Director of Workforce

The Board THANKED clinicians for the work they do day in and day out and CONGRATULATED them for their achievements.

9.3 Next Meeting

The next meeting will be held on the 17th April 2019 at District Headquarters Building.