

Minutes of the Hunter New England Local Health District Board

Seventy Ninth Meeting

18th and 19th September 2018

**Venue: Forster Community Health Service
and Manning Hospital**

Present

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

Apologies

Dr Martin Cohen and Dr Ian Kamerman

In Attendance

Mr Michael DiRienzo, Ms Karen Kelly, Stephen Oakley (Medical Staff Executive Chair, attended the Manning meeting only) and Ms Kylie McNamara

Order of Business: 1.1 – 9.3

TUESDAY 18TH SEPTEMBER 2018 COMMENCING AT 2.00PM

TOUR OF THE FORSTER COMMUNITY HEALTH SERVICE

The Board was given a tour of the Forster Community Health Service led by MS Louise Saville, Health Service Manager.

AFTERNOON TEA WITH FORSTER COMMUNITY HEALTH SERVICE STAFF

The Board was joined by the Forster Health Committee representatives, Mr Roger Lynch, Chair of Cape Hawk Community Hospital and Association (Site of Forster Private Hospital) and HNELHD staff for afternoon tea.

Health Service matters that were raised and NOTED:

- Telehealth
Services that utilise telehealth, in order to prevent patients from travelling for treatment include:
 - Orthopaedics.
 - Diabetes children's clinic (every second clinic via telehealth).
 - Oncology appointments with the Mater Hospital.
 - Endocrinologists (diabetes educators utilise telehealth).
 - Scopia with palliative care patients in the home.
 - Genetics counsellor.
 - Respiratory services.
- Work Health and Safety
 - A monthly WHS safety meeting is held in the centre, with all services within the building represented.
 - Injuries are very low – 5/6 weeks ago there was an incident, which was the first injury since 2003.
- Child and family health
 - Impact of NDIS on paediatrics – there are minimal NDIS providers in the area. Case load has increased dramatically whilst awaiting eligibility for NDIS.
 - The maternity unit has had an improvement to referral pathways via a standard email template. They don't miss any patients due to this system, also due to good relationships with providers, along with open communication with aboriginal health services.
- Chronic disease places pressure on services due to aged care.

Health matters raised by the Forster Health Committee were NOTED:

- There are three new volunteers on the local committee.
- Local health committee members sit on panels for recruitment into the service.
- Immediate interest is focussing on the future.
- There is a need in the community for people who are aging, and what resources are available in the community to ward off the requirement to go into care. The local community is interested and keen to work with the committee on this.
- Future planning and expansion/infrastructure will put more pressure on the local health system.
- Community health can assist with prevention of patients needing to travel ie. telehealth.
- Obesity is an issue in the local area.
- There is a need for a full time drug and alcohol counsellor in the area - there is only access to a part time counsellor at this point in time.
- The Committee was CONGRATULATED for being proactive with new ideas, and also the inclusion of two aboriginal elders as committee members.
- Roger Lynch CONGRATULATED the committee on the work they do, and expressed the thanks of the community, noting that the local community booklet is popular and has been distributed widely.

The Chair THANKED the Health Committee members, Mr Roger Lynch and Forster Community Health Service staff for their work.

BUSINESS OF THE MEETING

PRELIMINARY

1.1 Welcome, Apologies and Acknowledgment of Country

The Chair, Professor Lyn Fragar opened the business meeting at 3:35pm.

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

Mr Ken White reported that he has a potential conflict as he is on the Anglican Care Board. This conflict was NOTED by the Board.

1.3 Adoption of Minutes

The minutes of the meeting held on the 15th August 2018 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.

1.5 Board Chair Report

The Board Chair reported the following:

- The Immunology Crossroads Conference had been held at NEX in Newcastle on 24 August 2018, was opened by Michael DiRienzo which was very well received. Lyn Fragar had spoken at the dinner that evening, and the conference was very well organised and enjoyed by attendees.
- John Hunter Health Precinct Workshop was attended by the Board Chair on 8 August 2018. The positivity at the workshop was observed, and the workshop was beneficial to parties in attendance.
- A letter from the Secretary was forwarded to the CE and Board Chair (dated 28 September 2018) requesting confirmation that the District is complying in full with the seclusion and restraint guidelines. Marcia Fogarty, Executive Director Mental Health is managing draft response back to the Secretary.

1.6 Chief Executive's Report

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

- Executive Director Information Technology and Communication.
- Executive Director Infrastructure and Planning.
- Executive Director Finance.
- Chief Executive Western Sydney Local Health District.
- Meeting with Mid North Coast Local Health District.
- Hospital open days.
- NSW government cladding review.
- Maitland hospital project.
- John Hunter health and innovation campus – workshop.

- 2018 Rural health and research congress.
- ENT telehealth project – Armidale.
- Hydrotherapy pool – Armidale.
- Aboriginal patients 48 hours follow up.
- Minister Hazzard visit to Tomaree Hospital.
- Parliamentary secretary highlights Tamworth e-health initiatives.
- The new ministerial advisory committee for Rural Health (MACRH).
- Official launch of the JHH interventional laboratories.
- Banksia unit service planning.
- The people matter employee survey.
- SRC report.
- Local and state-wide performance update – July 2018.
- SEF agenda Friday 31 August 2018.

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

WEDNESDAY 19TH SEPTEMBER 2018 COMMENCING AT 8:30AM

TOUR OF MANNING HOSPITAL

The Board was given a tour of Manning Hospital led by Ms Jodi Nieass, General Manager, Lower Mid North Coast Sector and Dr Osama Ali, Director of Clinical and Medical Services, Lower Mid North Coast Sector.

MORNING TEA WITH MANNING HEALTH COMMITTEE

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

Health matters raised by the Manning Health Committee were NOTED:

- Publicity material in relation to the benefits of living and working in Taree is being drafted.
- There is a push to attract practitioners to the area – appointment has been made with Dr David Gillespie, MP to encourage/attract new practitioners (eg reduced HECS debt for length of stay working in a regional area).
- Aboriginal community – cultural rooms are greatly needed in the hospital. Aboriginal culture and awareness is required in order to avoid lack of dignity for aboriginal patients.
- Two indigenous community members do the consumer led surveys with local indigenous patients, with a very good response.
- The Committee is involved in reviewing safety and quality data - data/graphs from SMARTA and a brief is prepared on the impact to patients.
- Trending data will be included in the quality and safety figures moving forward, as a result of the recent accreditation.
- Consumer led surveys – consumers talk to patients to get real data, good gauge of how patients perceive safety and quality in the district. Messages are then taken back from the consumers to their local communities.
- General Manager Ms Jodi Nieass is a member of the local health committee and the channels of communication are always open.
- The Board CONGRATULATED the local health committee on accreditation with no recommendations.
- My Food Choices will be rolled out at Manning in due course, which includes more food choices for patients.

The Board CONGRATULATED and THANKED the Committee for its outstanding work.

COMMUNITY – THE PEOPLE WE SERVE

2.1 Community and Consumers Partnership Committee Minutes

The report and minutes from the meeting held on the 14th August 2018 had been distributed in the Board papers.

The Community Partnerships Forum is being held on 27 November 2018 in Muswellbrook. AGM will be held at the forum. Board member attendance is requested.

The report was NOTED by the Board.

2.2 Good Health Committee

There were no papers for this meeting.

2.3 Aboriginal Health Committee Meeting

The report and minutes from the meeting held on the 16th August 2018 had been distributed in the Board papers. The report was NOTED by the Board.

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 11th July 2018 had been circulated in the business papers. The report was NOTED by the Board.

3.2 Medical Staff Executive Council Report

There were no papers for this meeting.

A verbal update was given by Dr Stephen Oakey. It was NOTED that the sports day is held on an annual basis, along with a dinner on 23 November. These activities build a strong, supportive medical community.

3.3 New Business

3.3.1 Amendment to HNE District Strategic Plan

A paper had been distributed in the business papers. The paper was NOTED and the amendment was ENDORSED by the Board.

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 22nd August 2018 had been circulated in the business papers. The report was NOTED by the Board.

4.2 Patient Story

The Patient Story had been distributed in the business papers. The patient story was DISCUSSED and NOTED by the Board.

4.3 New Business

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

4.4 For Information

4.4.1 Safety and Quality Account 2018-2019

The Safety and Quality Account 2018-2019 was ADOPTED by the Board subject to some minor amendments being made.

ACTION: BOARD SECRETARIAT

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 held on the 14th August 2018 had been distributed in the business papers. The report was NOTED by the Board.

5.3 Audit and Risk Management Committee

The report and minutes of the meeting held on the 31st August 2018 had been distributed in the business papers. The report was DISCUSSED and NOTED by the Board.

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.

5.6 New Business

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

5.7 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 Maitland Hospital Committee

There were no papers for this meeting.

The Chief Executive provided a verbal update on the New Maitland Hospital project which was NOTED by the Board. The project is on time and will be finished late 2021.

The meeting NOTED that the New Maitland Health Committee is no longer required, and that future reporting on progress will be made within the Chief Executive's Report each month.

6.3 New Business

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

6.4 For Information

6.4.1 Approval of the Port Stephens HealthOne Project

The paper was distributed in the business papers. The paper was DISCUSSED and NOTED by the Board.

OUR STAFF AND WORKPLACE CULTURE

7.1 Medical and Dental Appointments Advisory Committee

The report and minutes of the meeting held on 28th August 2018 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

7.3.1 VMO (Dr Gayed) Manning Hospital – Key Points

Progress Report had been distributed in the business papers. The paper was DISCUSSED and NOTED by the Board.

7.3.2 NSW Health Senior Executive Development Program

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

BOARD DEVELOPMENT

8.1 Board Performance Report

The paper had been distributed in the business papers. The paper was DISCUSSED and recommended actions AGREED by the Board.

Agenda item for upcoming ELT meeting is collate a list of suggested questions about Safety and Quality that the Board can ask HNELHD employees at Board meeting morning teas/lunches.

ACTION ITEM: Board Secretariat

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

There were no papers for this meeting.

9.2 Feedback from the Previous Meeting

The feedback report from the August meeting had been distributed in the business papers. The paper was NOTED by the Board.

LUNCH WITH MANNING HOSPITAL CLINICIANS AND STAFF

The Board was joined by the staff and clinicians from Manning Hospital over lunch. The following were DISCUSSED and NOTED:

Employees from several clinical streams at Manning Hospital were present: Perioperative Services, Obstetrics and Gynaecology, Renal services, Patient Safety, Psychiatry, Nursing and Midwifery, Social work, Physio, Critical Care, Palliative Care, Oncology, Anaesthetists, Intensivists, ICU, Paediatrics and Quality Manager.

The Board CONGRATULATED the staff on the recent accreditation of the Sector.

Matters raised by the Manning Hospital staff were NOTED:

Recruitment and Retention

- Nursing and Allied Health has recruitment issues.
- The Taree Health Committee is showcasing the hospital and facilities in the area with a view to recruitment staff into the hospital.
- Medical Students are aware of what is in the local area, lots of students were hesitant due to geography, being away from family and friends. Education in Manning is appealing due to the experience gained in the hospital (a cross section of disciplines).
- The Psychiatry Unit interacts with medical students, there were more students wanting to come to Taree than positions were available – so there is a preference for this area compared to other places.
- Manning education centre is state of the art and could be a positive to draw staff to the area.
- Allied Health - Allocation of FTE is currently being looked into for some additional resources within Allied Health. They are looking at how they can increase efficiency and service with the limited budget that has been allocated. Strategic plans are in place, which will assist with advocate for funding/FTE

Patient Safety and Quality

Clinical Safety Patient Quality Committee – All service managers are present, along with all other committees that feed through to that committee.

Paediatric Services

- An excellent job is being undertaken with acutely ill children, but attention to ensuring required skills are available.
- Paediatricians are appreciative of the support by the hospital administration.
- There is concern around not getting the opportunity to practice enough with the ED and simulate, therefore causing a gap in preparing to be safe and delivering quality care.

Intensive Care Unit

- There has been a definite improvement, however still scope to improve more.
- Performance measures are compared to other units.
- Within the unit the morbidity and mortality meetings are held every month (or due to staffing shortage it may only take place every 3 months).
- Concerns were expressed regarding safety if staffing is not maintained.
- Funding has been given for Senior Medical Officers to be appointed, should aim for ICU Registrar to be appointed (ICU is the only area without a Registrar).
- Staff retention is an issue with Staff Specialists. Within ICU 1 to 1.5 years is the standard length of stay.

Anaesthetics

- To re-build a department we want staff that live locally. Locums are not known, but they are relied on. We need an incentive for staff to move here and stay for the longer term.

Allied Health

- Allied Health KPIs for Quality and Safety – looking at waitlisting, triaging and delivering service for the right people.
- Safety – KPIs are consistent across the board with nursing and medical (ie. hand hygiene, immunisation etc).

Nursing

- Change of National Standards re sterilisation. To meet standards meant renovating, which was approved - instruments are now shiny and silver. Stage 2 will have completion of the project. There is a low infection rate at Manning.

Medical Administration

- In the past 11 years improvement has occurred, it has been witnessed. 'We are proud of what we are doing and working on further improvement to take place'. Plans for ICU and Anaesthetists recruitment, in order to attract right people.

Renal Services

- Renal service staff are excited about new premises and helping local people to not have to travel. Looking forward to receiving funding for the training to do dialysis in the home. There will be an open day for staff to view the new premises in the near future.

9.3 Next Meeting

Board Meeting Dates for 2019

A proposed set of Dates and venues for 2019 Board meetings had been circulated.

The Board AGREED with the proposed program. The Chair and Board Secretariat will work to develop a revised Work Plan that includes the Board Education Program.

ACTION BY: Board Secretariat and Chair

The next meeting will be held on the 17th October 2018 at Calvary Mater Hospital.