

Minutes of the Hunter New England Local Health District

Board

Second Meeting

24th August 2011

Venue: Gloucester Health Service

PRESENT

Associate Professor Lyn Fragar, Dr Bruce Bastian, Dr Helen Belcher, Dr Felicity Barr, Ms Helen Staines, Professor Trevor Waring , Dr Ian Kamerman and Mr Fergus Fitzsimons

IN ATTENDANCE

Mr Michael DiRienzo, Professor Nik Bogduk , Ms Desiree Chymiak, Mr Todd McEwan and Mr Scott McLachlan

APOLOGIES

Mr Ken White, Mr Paul Henry and Mrs Janelle Speed

Order of business: 1- 7, 11, 9-10, 12-13

TOUR OF GLOUCESTER HOSPITAL

Council members and executive were provided a tour of the Gloucester Hospital led by Mr Paul Townsend and Ms Janine Briginshaw. Following the tour, Council met with members of the Local Health Advisory Committee.

The two key issues of concern raised by Local Health Advisory Committee members related to lack of clarity around the role and function of the Local Health Advisory Committee and problems with midwifery services.

BUSINESS OF THE MEETING

1. WELCOME AND APOLOGIES, ACKNOWLEDGEMENT OF COUNTRY

The Chair, Associate Professor Lyn Fragar, opened the Board meeting at 10.00am, welcomed those present and congratulated Mr Fergus Fitzsimons who was attending his first meeting as a member of the Board.

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

The Board ACCEPTED the apologies of Mr Paul Henry and Mrs Janelle Speed and also granted Mrs Janelle Speed special Leave of Absence for the duration of her medical indisposition.

2. CONFLICT OF INTEREST DECLARATIONS

2.1 Conflict of Interest Relating to this Meeting's Agenda

The Board NOTED that Dr Ian Kamerman may have a conflict of interest for the paper referring to the application for tender of the Manilla HealthOne.

It was AGREED that this would not be a conflict of interest for Dr Ian Kamerman.

1. MINUTES OF THE PREVIOUS MEETING

3.1 Adoption of Minutes of Meeting Held on 31st May 2011

The minutes from the meeting held on the 27th July 2011 had been circulated. The minutes were ADOPTED by the Board as a true and correct record.

The minutes in full will be published on the Board section of the Hunter New England Health Network website

ACTION BY: Secretariat

4. BUSINESS ARISING FROM THE PREVIOUS MEETING

4.1 Action Sheet – Report on Progress on actions not included in the agenda

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

5. UPDATE OF NSW STATE-WIDE DEVELOPMENTS

5.1 Report from Chief Executive and Chair

The Chair advised that all District Chairs have been invited to attend part of the Senior Executive Forum meeting this Friday, where the Minister for Health the Hon Jillian Skinner will be in attendance.

The Forum will enable the Senior Executive and Board Chairs to understand the rationale, substance and implications of the Governance Review and to determine the nature of the changes required.

The Board NOTED this information.

5.2 2011 Model By-Laws

In December 2010, as part of the transition process, a set of Model By-Laws were issued under the Health Services Act. The By-Laws were issues as Interim By-Laws, with the intention of settling final by-laws by mid 2011.

A final Model By-Law had been received from the Department of Health. The main changes were adjustments made to Part 7 of the By Laws to better support the peer selection process for Hospital Clinical Councils. The amended Part 7 had been circulated for the Board's consideration and comment.

The inaugural peer selection process for Hospital Councils was to commence shortly. Revisions to the peer selection provisions would thus need to be incorporated into the current District By-Laws.

One of the proposed changes was to remove the transitional provisions in the Interim By-Laws. Before making this change, the Department wished to be certain that the change would not impact on current District activities, and so was seeking advice as to whether Hunter New England Local Health District had established District based committees or continues to rely on the transitional committees.

The Board discussed and CONSIDERED the By-laws and were supportive of the suggested changes and AGREED that the peer selection process should proceed. The Department of Health is to be advised of the Board's approval.

ACTION BY: Secretariat

5.3 Service Agreement

The Board NOTED that the revised version of the Service Agreement between the Department of Health and the District had been circulated to the Board and returned to the Department of Health. The final version of the Service Agreement will be circulated to the Board once received from the Department of Health.

6. CHIEF EXECUTIVE 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 Local Health District.

- Tamworth redevelopment planning

- Appointment of District Allied Health Director
- Planned meeting of Chief Executive with Gloucester Shire Council
- Peer selection processes for Hospital Clinical Councils
- 2011/12 financial performance
- Minister for Environment and Maitland MP Hon Robyn Parker visit to Maitland Hospital
- Mater Medical Oncology Review
- Bureau of Health Information Quarterly Report
- Treasury Managed Fund Renewal

The report was NOTED by the Board.

7. DIRECTORS' REPORTS

Directors' reports had been circulated in business papers to members.

7.1 Mental Health Services

The report provided by Dr Dinesh Arya included information relating to:

- Progress on items reported in the previous month's report including planning for mental health inpatient beds and potential risk of reduced access to medium secure beds at the Kestrel Unit.

The Board NOTED the response from Dr Richard Matthews relating to changes for the Kestrel Unit.

The report was NOTED by the Board.

7.2 Acute Networks

The report provided by Mr Todd McEwan included information relating to:

- Armidale Rural Referral Hospital medical recruitment
- The Manning Rural Referral Hospital medical recruitment – inability to compete with Queensland remuneration packages
- Recruitment of key position New England and North West Regional Cancer Care Centre

The difficulties associated with recruitment and retention of medical appointments was NOTED by the Board.

The discussion raised issues of how health professionals undertake training and the District responsibilities for training. It was AGREED that a presentation would be made to the Board on training processes and programs.

ACTION BY: Secretariat

7.3 Nursing and Midwifery

The report provided by Ms Karen Kelly included information relating to:

- Decentralisation of the staffing service at Adamstown
- Impact of balanced rostering cessation
- Disaster unit – noting a successful grant application for advice for a \$22,000 grant to undertake a pilot project on "Preparing Community Based Patients for Natural Disasters".
- Central sterilizing issue at Calvary Mater Newcastle and management approaches.

The report was NOTED by the Board.

7.4 Communication and Stakeholder Engagement

The report provided by Ms Lauren Cruz included information relating to:

- Community and consumer partnerships project.

It has become clear that an immediate need is to focus on the Local Health Advisory Committees, their current roles and future objectives.

It was AGREED that a Forum of Local Health Advisory Council will be held in November. A working party consisting of Prof Lyn Fragar, Ms Lauren Cruz, Mr Todd McEwan, Mr Scott McLachlan and Dr Helen Belcher will be established to plan for the Forum.

ACTION: Secretariat

7.5 Workforce Development

The report provided by Ms Glenda Dingwall included information relating to:

- Laundry allowance retrospective payment will be completed by 31st August 2011.
- Progress with balanced rostering
- Industrial dispute at Maitland Hospital regarding security arrangements
- Medical Vacancy Board – numbers and impact of vacancies - currently there are 99 positions actively being recruited each of these will be at different stages of the recruitment process.

The report was NOTED by the Board.

7.6 Primary and Community Networks

The report provided by Mr Scott McLachlan included information relating to:

- COAG Sub Acute Care funding – report on service funding on \$18 million and 30 rehabilitation beds for Kurri Kurri and Belmont.
- Manilla Health Service

The report was NOTED by the Board.

The Board AGREED to make a request to NSW Health regarding the status of the current funding for the Geriatric Evaluation Management, Palliative Care, Community Rehabilitation and Psychogeriatric projects/services.

ACTION BY: Chair and Chief Executive

7.7 Allied Health

The report provided by Mr Kim Nguyen included information relating to:

- Psychologists national registration
- Psychologists who are employed under the Health Service Manager or other Health Professionals State Industrial Awards – registration and classification

The reported was NOTED by the Board.

7.8 Clinical Governance

The report provide by Prof Anne Duggan included information relating to:

- Clinical practice improvement – focus on safe blood transfusion

- Evaluation of safety and quality – incident management
- Collaboration capacity and knowledge for quality and safety – newsletter Quality Matters and Royal Newcastle Hospital Oration.
- Creating the best environment – open disclosure.

The Board AGREED that they would like to receive more detailed briefing around incident management.

7.9 Children Young People and Families

The report provided by Professor Trish Davidson included information relating to:

- Manning paediatric services
- Capital works planning for PICU and NICU – requires further attention.
- Governance of the Northern Child Wellbeing Unit
- Building strong foundations expression of interest
- HNE Children, Young People and Family Health Services governance Framework

The report was NOTED by the Board.

7.10 Information Technology

The report provided by Mr Warren Laurence included information relating to:

- Status of the Commonwealth Department of Health and Ageing and the National E-Health transition Authority funded Personally Controlled Electronic Health Record project.

The report was NOTED by the Board.

7.11 Finance

A summary of Financial Performance for the month ending 31st July 2011 was provided to the Board.

- The District financial position in terms of cash is reasonable.
- The focus on FTE management remains pivotal in achieving budget in 2011/12.
- Health Support Services have accumulated a backlog of creditors in July 2011, at this stage it is still at a manageable level.
- The 2011/12 Budget process is underway, pending advice from the Department of Health regarding additional funding or actions required by the District to achieve savings. This advice is not expected until 6th September 2011.

The report was NOTED by the Board.

7.12 Balanced Scorecard Report – year to date performance

Nil report this month.

LUNCH WITH CLINICIANS

A number of clinicians joined the Board for lunch. Issues raised included:

- General Practitioner shortages in the Gloucester area
- The need for a social worker for Gloucester
- Retention of staff and recruitment of younger personnel
- The location of the Emergency Department is upstairs, location is not ideal
- Need for a specialist generalist mental health worker

8. COMMITTEE REPORTS

The following update on progress with Sub-committees was provided to the Board.

1. Audit and Risk Management Committee

The District has received further advice from NSW Health in relation to the Audit and Risk Management Committee's structure. These relate to membership, meeting procedure, payments and reporting.

NSW Health is seeking an exemption from NSW Treasury requirements that pre-qualified independent chairs/members are limited to a maximum five concurrent appointments.

NSW Health is also seeking exemptions to engage from the Prequalified panel, those people who have previously been employed in a senior management role by NSW Health, statutory body or related body, 12 months ago or more (change from three years) and so long as that engagement is not to the former area of the organisation in which that person was employed.

NSW Treasury has also been informed that due to the transition to Local Health Districts, and for business continuity, that existing contracts with NSW Health be continued.

The Director of Internal Audit has responded to NSW Health to confirm compliance with the above.

The Board NOTED the report.

2. Health Care Quality Committee

A review of subcommittees of the Health Care Quality Committee will be undertaken over the next few months.

3. Clinical Council

At the first meeting of the District Clinical Council, clinicians agreed that the draft Charter was appropriate but requested that Workforce, Training and Education and Research were added to the Terms of Reference. It was agreed that broad representation was appropriate but that further investigation of the communication between individual hospital councils and the district Clinical Council should occur. Finalisation of the Terms of Reference, membership and processes for inclusion of issues for discussion will occur at the next meeting.

4. Progress with Implementation Action Plan

The Chief Executive has now formally written to the respective Executive Sponsors about the need to review procedures, subcommittees and reporting relationships for each of the governance committees.

There have also been some discussions about other potential governance committees, in addition to those set out under the Interim ByLaws. In addition to the work currently being undertaken on community engagement, where a committee reporting to the Governing Council is being considered, it is likely that a recommendation about a committee for Research Governance will be proposed. Progress is being made toward the establishment of this committee and a further report will be made available for the next meeting of the Board.

Report NOTED by the Board.

8.1 Medical and Dental Appointments Advisory Committee Charter

The organisational and governance changes (including amendments to the NSW Health Model By Laws that have occurred as a result of the implementation by NSW Health of the National Reform Agenda has lead to a need to review the membership of the MDAAC.

In 2010, the MDAAC Charter was reviewed and a new version endorsed by the MDAAC in November. This review has now been repeated as part of implementation of the new District governance structures and with the engagement of the new Chair, Trevor Waring.

The Board ENDORSED the Charter.

9. CORRESPONDENCE

The Board were circulated the correspondence for the period June-July 2011 with the business papers.

Late correspondence was received by the Chair which included:

- In Safe Hands Forum – will be held on the 7th September 2011 in Sydney. The Chief Executive Mr Michael DiRienzo together with Dr Helen Belcher will be attending.
- Aboriginal Strategic Framework Launch – will be held on the 2nd September. The Chief Executive Mr Michael DiRienzo and relevant District personnel will be attending.
- Your Say Survey Results – will be held on the 30th September 2011. Both the Chair Prof Lyn Fragar and Chief Executive Mr Michael DiRienzo will be attending.

The correspondence was NOTED by the Board.

10. CURRENT ISSUES

10.1 Chief Executive

There were no further issues to report that had not been addressed earlier in the meeting.

10.2 Medical Staff Executive Council

Professor Nik Bogduk brought to the Board the concern from the Medical Staff Executive Council that the Board may not be aware of stresses in the John Hunter Hospital due to increasing levels of trauma and increasing level of complexity of cases being admitted. Professor Bogduk suggested that moves to ensure that patients who do not require tertiary care are admitted to other referral hospitals.

It was AGREED that Professor Bogduk should supply to the Board the relevant document that demonstrates the problem.

ACTION BY: Professor Bogduk

10.3 Chair

There were no further issues to report that had not been addressed earlier in the meeting.

10.3 Members

1. Members had raised concerns around claims for attending meetings outside of the Board which are Board related.

It was AGREED that the Audit and Risk Management Committee be requested to provide the Board with advice as to how payment to be made in accordance with current government policy.

ACTION: Chief Executive

2. The following issues were also raised by members:
 - Priorities and efficiency of clinics using the Royal Flying Doctors Service
 - The evolving role of John Hunter Hospital in taking on higher and more complex role and the need to relook at the planning process and use of feeder hospitals.
 - How Medical Staff Council should give and receive advice.

It was AGREED that the Chief Executive discuss these further with Dr Bastian.

ACTION BY: Chief Executive

11.0 PRESENTATIONS

11.1 Aboriginal Health Strategies

The Chair welcomed to the meeting Mr Tony Martin Director Aboriginal Health who made a presentation on Aboriginal Health Strategies. The presentation included information relating to:

- Initiatives in Aboriginal Health
- Policy drivers
- Aboriginal funded programs
- Aboriginal hospital liaison officers
- Guiding communities
- Key initiatives
- Aboriginal employment
- Cultural respect education
- Cultural redesign strategy

The Board NOTED the presentation and it was AGREED that they have a crucial advocacy role in taking the organisation forward in closing the gap.

11.2 Board Evaluation

The Chair had circulated a research paper on Board Effectiveness and Performance to the Board for discussion.

It was AGREED that there is benefit to the Board undertaking a formal Board evaluation process. It was AGREED that the Chair will prepare a draft evaluation template for use by the HNE Local Health District Board.

ACTION By: Chair

12. NEXT MEETING

The next Board meeting is scheduled for the 28th September 2011 and will be held at District Headquarters.

12.1 Meeting schedule 2012

The Chief Executive to determine venues for the meeting dates in 2012.

ACTION: Chief Executive

13. MEETING EVALUATION

Members were requested to complete the meeting evaluation form for the current meeting and return these to the Chair.

The meeting closed at 5.00pm.

Professor Lyn Fragar
Chair

Date _____

ACRONYMS

CE	Chief Executive
LHD	Local Health District
HSS	Health Services Support
DOH	Department of Health
HNE	Hunter New England
HSS	Health Support Service
ACI	Agency for Clinical Innovation

**Hunter New England Health Network Governing Council
Action List as at September 2011**

Date of Meeting	Item Number	Action	Responsibility	Status as at September 2011
09.02.11	9	Review current delegations and report back to the District Board.	Chief Executive	November 2011
28.03.11	9.5	Development of Local Health District strategic plan	Chief Executive and Chair	Pending
06.05.11		Present aged care strategic plan to District Board.	Chief Executive	November
31.05.11	6	<p>District Board to meet with representatives of the Calvary Newcastle Mater to discuss key strategic issues.</p> <p>The Board would like to be updated on the following:</p> <ul style="list-style-type: none"> • Services being provided • How the Mater is organised • Management and representatives to discuss together regarding improvements, going forward strategically in the future. 	Chief Executive	<p>The Chief Executive has contacted the Little Company of Mary and Senior Executive to arrange Chief Executive Officer, Director of Public Hospitals and Local CE to meet present to the Board:</p> <ol style="list-style-type: none"> 1. Little Company of Mary Strategic Plan. 2. Board meeting being scheduled for early 2012 at the Mater including tour of hospital and meeting with clinicians and community groups.
31.05.11	8	Presentation to the District Board on Hunter New England's Clinical Streams and Networks.	Chief Executive	Trish Davidson Director Children Young People and Families at the September meeting.
22.06.11	7.3	Presentation to the District Board on the Patient Flow Portal and Patient Flow Strategies	Chief Executive	Karen Kelly to present at the November Board Meeting.
22.06.11	7.1	Planning for Mental Health Inpatient beds in Hunter New England. A final plan for future needs of inpatient mental health	Chief Executive	Dinesh Arya to present to the District Board at the September

		beds will be ready for consideration by the District Board.		meeting.
22.06.11	7.6	COAG Section 19(2) Exemption Initiative – Better Access to Primary Care Services in Rural Areas. An update will be provided to the September meeting.	Chief Executive	Scott McLachlan to provide an update at the September meeting.
22.06.11	11	Executive Team to review the current health services plan (facility/services profile) and provide a report/recommendations to the Board regarding health services role delineation and capabilities	Chief Executive	Chief Executive to provide a report at the November meeting.
27.07.11	5.2	Performance Management Framework – The Chief Executive to prepare a document that describes the performance management framework for the District, with scheduled timeframes for monthly performance review in association with Board and committee meetings.	Chief Executive	Pending, awaiting final service agreement and performance management timetable.
27.07.11	7.7	EnableNSW be requested to: <ul style="list-style-type: none"> Review their guidelines for assessment and supply of products to ensure patients have a safe level of support for HNE consumables. Lobby manufacturers of HEN consumables to produce re-usable HEN supplies. 	Executive	Director Allied Health to update the Board October 2011.
24.08.11	11.2	Board Evaluation: Chair will prepare a draft evaluation template for use by the HNE Local Health District Board.	Chair	November 2011
24.08.11	7.2	Presentation on training processes and programs.	Secretariat	To be determined
24.08.11	7.6	Request to be made to NSW Health regarding the status of the current funding for the Geriatric Evaluation Management, Palliative Care, Community Rehabilitation and Psychogeriatric projects/services	Chair and Chief Executive	
24.08.11	10.2	Professor Nik Bogduk brought to the Board the concern from the Medical Staff Executive Council that the Board may not be aware of stresses in the John Hunter Hospital due to increasing levels of trauma and increasing level of complexity of cases being admitted. Professor Bogduk suggested that moves to	Professor Bogduk	

		<p>ensure that patients who do not require tertiary care are admitted to other referral hospitals.</p> <p>Professor Bogduk should supply to the Board the relevant document that demonstrates the problem.</p>		
24.08.11	10.3	<p>Audit and Risk Management committee be requested to provide the Board with advice as to how payment to be made in accordance with current government policy.</p>	Chief Executive	
24.08.11	10.3	<p>Dr Bruce Bastian raised the following issues:</p> <ul style="list-style-type: none"> • Priorities and efficiency of clinics using the Royal Flying Doctors Service • The evolving role of John Hunter Hospital in taking on higher and more complex role and the need to relook at the planning process and use of feeder hospitals. • How Medical Staff Council should give and receive advice. <p>The Chief Executive discuss these further with Dr Bastian.</p>	Chief Executive	