

# **Minutes of the Hunter New England Local Health District Board**

## **Eighth Meeting**

**27<sup>th</sup> and 28<sup>th</sup> March 2012**

**Venue: Armidale Hospital**

**Present**

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

**Apologies**

Ms Helen Staines and Professor Nik Bogduk

**In Attendance**

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

Order of business: 1- 4, 11.1, 5-10, 11.2-13

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## **27 MARCH 2012 MEETING WITH MEMBERS OF THE ARMIDALE HEALTH COMMITTEE**

The Chair opened the informal meeting of the Board with members of the Armidale Health Committee at 5.00pm, and introduced Board members and Local Committee members.

Achievements of the Local Health Committee include: Improved programs for Aboriginal mothers and babies; the Quiet Room at the hospital; an annual meeting of adjoining local Health Committees; information about health provided at the Visitors' Centre; participation in Clinical Services Plan development.

Issues of concern were discussed and included:

- Medical recruitment, and issues relating to NSW award overtime recognition
- Membership of the Local Health committee

## **28 MARCH 2012 BOARD MEETING**

### **1. Welcome and Apologies, Acknowledgement of Country**

The Chair, Associate Professor Lyn Fragar opened the meeting at 9.00am and welcomed those present.

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

The Board ACCEPTED the apologies of Ms Helen Staines and Professor Nik Bogduk.

### **2. Declarations of Conflict of Interest**

Mr Paul Henry declared that he had a conflict of interest for Item 6.2. It was agreed that Mr Henry would absent himself during this Agenda Item

### **3. Minutes of the Previous Meeting**

#### **Adoption of the minutes held on the 22<sup>nd</sup> February 2012.**

The minutes from the meeting held on the 22<sup>nd</sup> February 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 with Item 6.4 excluded.

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 Management of HNE Health Service Agreement**

Information regarding the Management of HNE Health Service Agreement and the Performance Management Process had been circulated to the Board.

The Board NOTED the information provided and AGREED with the Performance Management Process.

## **4.3 Whole of NSW Government Microsoft Contract**

The Board received a brief on the progress of the cost increases resulting from the new contract. The brief was provided for information.

The Board NOTED the information .

## **5. Standing Items**

### **5.1 Board Chair Report**

The Chair provided verbal reports on the following:

1. Opening of Manilla Health Service on 5 March 2012
2. Participation in the Managers Forum on 13<sup>th</sup> and 14<sup>th</sup> March.  
It was AGREED that Board members should have the opportunity to attend one forum per year on a rotational basis.
3. The Council of Chairs meeting with the Minister for Health and Director General on the 16<sup>th</sup> March.
4. A meeting of the Principal Official Visitor, and locally based Official Visitors under the NSW Mental Health Act, with the Chief executive and Director Mental Health on 21 March.  
The Official Visitors report document had been distributed to the board.  
The Official Visitors see the Board as having a significant role in addressing the issues raised in the report.

It was RESOLVED that a Mental Health Sub- committee of the Board be established to assist the Board and Chief Executive in overseeing improvement of mental health services and ensuring consumer and carer involvement in mental health services. Review of this committee will occur in 12 months time to determine the need to continue the committee on an ongoing basis. Professor Trevor Waring and Ms Helen Staines are Board representatives on this committee.

### **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:

- Deputy Director General positions
- Chief executive positions for Pillar organisations
- Support Services Innovation Support Scholarships 2012-04-13

- Completion of an MCC investigation
- 2012 Aboriginal Health Awards
- Minister of Mental Health visits
- Primary and Community Networks GP VMO Survey

### **5.3 Finance and Performance Report**

A brief had been provided to the Board by Mr Mark Jeffrey which summarised the financial performance.

Year to date general fund result is (\$5.8)M unfavourable and all programs (\$5.3)M unfavourable to budget.

The District remains on target to achieve a balanced budget for 2012.

The Executive Leadership Team has recently implemented a savings strategy across the whole Local Health District. The strategy includes a focus on FTE levels, overhead and discretionary spending. This work will guide units into preparing 2012/13 budgets.

The report was discussed and NOTED by the Board.

### **5.4 Finance and Performance Committee**

Mr Paul Henry tabled a memo which outlined the issues arising from the meeting on the Finance and Performance Committee.

The report was NOTED by the Board.

### **5.5 Health Care Quality Committee**

Dr Helen Belcher's report had been circulated with the Board papers. The last Health Care Quality Committee was held on the 8<sup>th</sup> March 2012 and the brief outlined matters considered at that meeting. The draft minutes of this meeting were also provided to the Board.

The report was NOTED by the Board.

### **5.6 Audit and Risk Management Committee**

A report was tabled by Dr Felicity Barr outlining issues arising from the Audit and Risk Management Committee held on the 20<sup>th</sup> March 2012.

The report was NOTED by the Board.

### **5.7 Medical and Dental Appointments Advisory Committee**

Professor Trevor Waring reported that the Quinquennium appointment process is underway with 3000 recommendations and privileges. Some performance issues have been identified and there will be some extraordinary Medical and Dental Appointments Advisory Meetings that will occur over the following weeks to address these issues.

The report was NOTED by the Board.

## **5.8 Medical Staff Executive Council Report**

Professor Nik Bogduk was an apology for the meeting and there was no report for this meeting.

## **5.9 Members Report**

Members had no further issues for discussion at this meeting.

## **6. New Business**

### **6.1 Rural Referral Hospitals Report**

A brief had been provided by Mr Todd McEwan. The Rural Referral Hospitals Report had been undertaken by the previous executive to examine the roles of the four rural referral hospitals in the Hunter New England to achieve consistency and standardisation of services provided. The plan development process brought clinicians and managers from across the HNE Health Rural Referral Hospitals to address these issues. It was recommended that the report be used as an internal document to inform operational planning until such time as the services plans for Maitland and Manning are completed.

The Board RESOLVED to adopt the recommendation.

### **6.2 Inverell Health Services Plan**

Mr Paul Henry left the room during this Agenda Item discussion.

The Board had been provided with a brief and the Inverell Health Services Plan. A local planning exercise for Inverell Health Services had been undertaken to review the role, range and delineation of current hospital and community health services provided in Inverell, in the context of community needs, and the availability of a skilled workforce to sustain service delivery into the future. The plan is based on feedback from community and staff consultations held in Inverell in 2011. Many strategies will be aimed at improving access now and into the future, building and strengthening our services and creating closer partnerships between community organisations and partnering health providers.

The document is currently available for comment on the internet for stakeholders to review. An open day will be organised in the near future. A meeting is scheduled between the Mayor, Mr Michael DiRienzo, Mr Scott McLachlan and Ms Maree Bacigalupo to discuss the plan.

The Board requested the following to be included in the plan:

- Reference to Lead Clinicians Group
- Inclusion of flow data on private hospitals flows and Queensland flows.
- A section and strategy around engaging the community and the role of the Local Health committee

The Board also requested review of the presentation of data relating to hospital separations for residents of Inverell LGA, that does not include separations from private hospitals. Milestones for action on the recommendations are to be developed.

### **6.3 Hunter New England District Health Strategic Plan**

The Board had received a report with draft strategic plan that had been prepared by the Senior Executive following the Board/ executive planning meeting in December 2011.

The Board made suggestions for some changes to be incorporated.

The revised Plan will be brought back at the April meeting , the Executive Team to be invited to attend this session.

ACTION: Chief Executive

### **6.4 Lead Clinicians Group**

A Brief had been provided as an out-of-session document to the Board, outlining the preferred arrangements for establishment of a Lead Clinicians Group with the Medicare Locals.

The Board RESOLVED to adopt the recommended arrangements.

## **7. Correspondence**

Board members had been circulated the correspondence for the period February to March with the business papers.

The correspondence was NOTED by the Board.

## **10. Next Meeting**

The next Board meeting is scheduled for the 30<sup>th</sup> April 2012 and will be held in Belmont.

## **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

## **LUNCH WITH THE CLINICIANS**

A number of clinicians joined the Board and Executive for lunch. Issues that were raised during discussions included:

1. Nursing  
Positive relationships with community and staff in community health, and good team to work with.  
The service has a full complement of nursing staff however there are issues with recruiting midwives

2. Allied health – small shortages of staff
3. Medical staff issues - recruitment of medical staff for sustainability of services is a key issue to be resolved for Armidale Health service
  - Medical staff supplemented currently with locums.
  - Intensive care unit – high level surgery numbers.
  - Currently have approximately 8 medical positions unfilled.
  - Need a strategy to address medical workforce shortages.
  - Need to attract both junior and senior medical staff to the area
  - Need to recruit International Medical Graduates living the in the area and retain them
4. Clinical ultrasound – will provide safe medicine and will provide cost reduction

The meeting closed at 2.00pm.